

State of Rhode Island Office of the Secretary of State

Fee: \$20.00

Division Of Business Services 148 W. River Street Providence RI 02904-2615 (401) 222-3040

Non-Profit Corporation Annual Report

Filing Period: February 1 - May 1

In accordance with R.I.G.L. 7-6-94, each corporation failing or refusing to file its annual report within the time prescribed by law (R.I.G.L. 7-6-91) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2023

- 1. Corporate ID No. 000105234
- 2. Name of Corporation Christ Church Evangelical Covenant
- 3. State of Incorporation

State: RI

ARTICLE III

Using the dropdown labeled NAICS Code below, select the classification title that describes the primary type of activity in which your entity engages. The box to the right of the dropdown will populate a NAICS Code based on the chosen selection. If the NAICS Code is known, enter it into the box on the right. For further assistance with selecting a classification <u>click here.</u>

NAICS Code

813110

4. Principal Office Address

No. and Street: 61 CEDAR AVENUE UNIT 6

City or Town: <u>EAST GREENWICH</u> State: <u>RI</u> Zip: <u>02818</u> Country: <u>USA</u>

5. Brief Description of the Character of the Affairs Conducted in Rhode Island

CHURCH-WORSHIP EDUCATION OUTREACH

6. Names and Addresses of the Officers and Directors:

All Directors and Officers must be listed individually. The number of DIRECTORS of a Rhode Island Corporation shall not be less than 3.

Title	Individual Name	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country

PRESIDENT	MICHAEL POOLE	4 PHEASANT CT. CRANSTON, RI 02920 USA
TREASURER	MATTHEW COLETTA	99 MELBOURN RD WARWICK, RI 02886 USA
DIRECTOR	VANN TRAPP	236 IVES ST. WARWICK, RI 02818 USA
DIRECTOR	CHERYL LAVORNIA	20 WOODSIA RD. SAUNDERSTOWN, RI 02874 USA
DIRECTOR	RYAN LOSPALUTO	62 GLADYS DR. NORTH KINGSTOWN, RI 02852 USA

7. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78

CHERYL LAVORNIA 61 CEDAR AVENUE, UNIT 6 EAST GREENWICH, RI 02818

8. This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver, or Trustee.

Signed this 1 Day of February, 2023 at 2:01:26 PM by the authorized person. This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-6.

By CHERYL LAVORNIA

Signature of Authorized Person

Form No. 631 Revised 09/07

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