, RI SOS Filing Number: 202327676450 Date: 2/3/2023 4:00:00 PM



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: Non-Profit Corporation

2023

FEB 0 3 2023

1329

→ Filing period: February 1 - May 1

→ Filing Fee: \$20.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

1. Entity ID Number 2. Exact name of the Corporation			
1. Entity ID Number 2. Exact name of the Corporation			
000031353 River Doint Advent Christian Church of West Librure			
10 Chair at language and the control of the control			
Rhode Island Conducting religious services of			
NAICS Code Worship and Bible Study			
813110	'		
6. Principal Office Address	City	State	Zip
1107 Main Street	West Warwick	RI	02893
7. List ALL officers (names and addresses) Check the box to indicate an attachment			
President Name / Silva	Nev. Douglas W. Tourace		
Street Address 3 Kowalik Drive	Street Address 174 Fair View	Ave.	
West Warwick RI 02893	Coventry	State	02816
Socretary Name Doreen F. Wandington	Treasurer Name 1 SKORO	had	
Street Address i C / /	Street Address /		
17 Colvin Street	9 14,11 Stree	7	T_
Hope State Zp 2831	Coventry	State I	02816
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment			
Digostor Name Bichard P. Champagne, Ir	Drector Name	put	
Street Address Rd	Street Address	The same of the sa	
Consentry State Zip 28/6	Even tru	State	Zip 12283/
Dipector Narryle Trederick D. Waddington	D rector Name	1 1 <u>-</u>	
Street Address / Street	Street Address		
City Hope State Zip 038.31	City	State	Zıp
9. The Registered Agent information of record with the RI Department of State is accurate. Changes require filing Form 641.			
Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and			
statements, and that all statements contained herein are true and correct.			
This report must be signed by either the President, Vice-President, Secretary, Assistant Se	cretary, Treasurer, duly Authorized Represental	T	e.
Name of Officer/Authorized Representative Doreen F. Waddington		Feb / 2023	
Signature of Officer/Authorized Representative			
Horsen F. Waddington			

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov