



**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.** 000028782

**2. Name of Corporation** New Mt Zion, Inc

**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 [click here](#).

NAICS Code

813110

**4. Principal Office Address**

No. and Street: 375 CAHILL STREET

City or Town: PROVIDENCE State: RI Zip: 02905 Country: USA

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

CHURCH

**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 First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
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PRESIDENT	SHURLA WHITE	1811 WARWICK AVENUE, 18N WARWICK, RI 02889 USA
TREASURER	COREY JONES	3 AMANDA WAY PROVIDENCE, RI 02904 USA
SECRETARY	LISA WILKERSON	120 HAWKINS ST PROVIDENCE, RI 02908 USA
VICE PRESIDENT	WILLIE MCBRIDE	72 CROMWELL AVE PROVIDENCE, RI 02907 USA
DIRECTOR	LOWELL WHITE	1811 WARWICK AVE #12W WARWICK, RI 02889 USA
DIRECTOR	LISA JONES	53 DOWNES AVENUE, APT 2 PAWTUCKET, RI 02861 USA
DIRECTOR	TYANDRA RODERICK	24 PINE GROVE ST PAWTUCKET, RI 02863 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**

SHURLA F. WHITE 375 CAHILL STREET PROVIDENCE , RI 02905

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

**Signed this 12 Day of February, 2023 at 9:58:52 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 SHURLA F. WHITE  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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