



**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.** 001745701

**2. Name of Corporation** Church At The Well

**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: 426 FARMINGTON AVE

City or Town: CRANSTON

State: RI

Zip: 02920

Country: USA

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

THE SPECIFIC PURPOSE OR PURPOSES FOR WHICH THE CORPORATION IS ORGANIZED ARE TO ESTABLISH AND OVERSEE PLACES OF WORSHIP, CONDUCT THE WORK OF EVANGELISM, CREATE DEPARTMENTS NECESSARY TO SUPPORT MISSIONARY ACTIVITIES AND TO LICENSE AND ORDAIN MINISTERS OF THE GOSPEL AND TO ALSO ENGAGE IN ACTIVITIES

WHICH ARE NECESSARY, SUITABLE OR CONVENIENT FOR THE ACCOMPLISHMENT OF THAT PURPOSE, OR WHICH ARE INCIDENTAL THERETO OR CONNECTED THEREWITH WHICH ARE CONSISTENT WITH SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE. THIS CORPORATION IS ORGANIZED AND OPERATED EXCLUSIVELY FOR RELIGIOUS PURPOSES WITHIN THE MEANING OF SECTION 501(C)(3), INTERNAL REVENUE CODE.

**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.**

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
INCORPORATOR	JERMAINE CURTIS	426 FARMINGTON AVE CRANSTON, RI 02920 USA
DIRECTOR	SUSAN CURTIS	426 FARMINGTON AVE CRANSTON , RI 02920 USA
DIRECTOR	JERMAINE CURTIS	426 FARMINGTON AVE CRANSTON, RI 02920 USA
DIRECTOR	SHERRY HOLMAN	299 SHAWMUT AVE CENTRAL FALLS, RI 02863 USA
DIRECTOR	DIRK WALLACE	31 NARDOLILLO STREET JOHNSTON, RI 02919 USA
DIRECTOR	SONYA BARBOSA	105 SCHOOL STREET CENTRAL FALLS , 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**

JERMAINE CURTIS 426 FARMINGTON AVE CRANSTON , RI 02920

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

**Signed this 24 Day of February, 2023 at 7:54:07 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 JERMAINE CURTIS  
Signature of Authorized Person

Form No. 631  
Revised 09/07

© 2007 - 2023 State of Rhode Island  
All Rights Reserved