	State of Rhode	Island	Fee: \$20.00
	Office of the Secreta	ary of State	
	<b>Division Of Busines</b>	s Services	
	148 W. River S	treet	
	Providence RI 029	04-2615	
1636	(401) 222-30	40	
Non-Profit Corporation Annual Report Filing Period: February 1 - May			
In accordance with R.I.G.L. 7-0 annual report within the time pr penalty fee of \$25.00.			
ANNUAL REPORT YEAR - EN	TER THE <u>CURRENT</u> FILING	(EAR <b>2023</b> : <u>2023</u>	
1. Corporate ID No. 0000	26748		
2. Name of Corporation <u>The</u>	Edgewood Congregational C	<u>Church</u>	
3. State of Incorporation			
State: <u>RI</u>			
	NAICS CODE		
Using the dropdown labeled N primary type of activity in which populate a NAICS Code based box on the right. For further as	ch your entity engages. The d on the chosen selection. If	box to the right of the the NAICS Code is kr	e dropdown will
NAICS Code			
<u>813110</u>			
4. Principal Office Address			
No. and Street: 1788 BR	OAD STREET		
City or Town: <u>CRANS</u>		e: <u>RI</u> Zip: <u>02905</u>	Country: <u>USA</u>
5. Brief Description of the Ch	paracter of the Affairs Condu	icted in Rhode Island	k
RELIGIOUS/NON-PROFIT	·		
6. Names and Addresses of	the Officers and Directors:		
All Directors and Officers m Island Corporation shall not		e number of DIRECT	ORS of a Rhode
Title	Individual Name First, Middle, Last, Suffix		Iress State, Zip Code, Country

TREASURER	IDOWU O KUTI	70 CALLA STREET PROVIDENCE, RI 02905 USA	
TREASURER	IDOWU KUTI	70 CALLA STREET PROVIDENCE, RI 02905 UNI	
SECRETARY	LESLIE MCCREA	103 BENEDICT ROAD WARWICK, RI 02888 USA	
PRESIDENT	PATRICIA KOHLER	189 ALBERT AVENUE CRANSTON, RI 02905 USA	
DIRECTOR	JUDY PROVORSE	P O BOX 98 HOPE, RI 02831 USA	
DIRECTOR	KENNETH SCARBOROUGH	25 STRATFORD ROAD CRANSTON, RI 02905 USA	
DIRECTOR	CINDY CORNELL	61 VILLA AVENUE CRANSTON, RI 02905 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

WENDY M. SULLIVAN 1788 BROAD STREET CRANSTON , 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 2 Day of July, 2023 at 1:29:19 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 IDOWU KUTI

Signature of Authorized Person

Form No. 631 Revised 09/07

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