



**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 - ENTER THE CURRENT YEAR 2024:** 2024

**1. Corporate ID No.** 001724500

**2. Name of Corporation** Liberia Episcopal Community Of Rhode Island (LECUSA - RI)

**3. State of Incorporation**

State: RI

**NAICS CODE**

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: 15 CARR STREET

City or Town: PROVIDENCE

State: RI

Zip: 02905

Country: USA

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

A)TO BE A FUNCTIONAL AND RECOGNIZED CHAPTER OF THE NATIONAL BODY OF THE LIBERIAN EPISCOPAL COMMUNITY IN THE USA (LECUSA);B)TO SERVE LIBERIAN EPISCOPALIAN IN THE STATE OF RHODE ISLAND IN THE AREAS OF PASTORAL BENEVOLENCE, AND SOCIAL ACTIVITIES AND TO SUPPORT THE THE MISSION OF THE NATIONAL LECUSA.

**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
PRESIDENT	BARBARAA BADIO	15 CARR STREET PROVIDENCE, RI 02905 USA
DIRECTOR	PATRICIA SONPON	808 RIVER AVENUE PROVIDENCE, RI 02908 USA
DIRECTOR	SAMUEL DORBOR	38 THOMAS AVENUE PAWTUCKET, RI 02860 USA
DIRECTOR	MUSA S GOLL	34 VERNDAL AVENUE PROVIDENCE, 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

ELFREDA H THORPE 79 SUPERIOR STREET PROVIDENCE , RI 02907

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

Signed this 27 Day of March, 2024 at 6:44:04 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 MUSA GOLL  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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