RI SOS Filing Number: 202451319830 Date: 4/17/2024 4:00:00 PM

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State of Rhode Island **Department of State - Business Services Division**

Annual Report for the year: 2024 **Non-Profit Corporation**

→ Filing period: February 1 - May 1

\rightarrow	Penalty:	Additional	\$25.001	fee if	form is	not filed	by I	May	31
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→ Filing Fee \$20.00 → Penalty: Additional \$25.00 fee if form is not filed by May 31.							
1 Entity ID Number 28780	2. Exact name of the Corporation Chinese Christian Church of Rhode Island						
State of Incorporation Rhode Island	Brief description of the character of business conducted in Rhode Island Church						
4. NAICS Code 813110-Religious Organ							
6. Principal Office Address 333 Roosevelt Ave	•			State RI	Zip 02860		
7. List ALL officers (names and add	lresses)		Check the	box to indicate an a	ttachment 🔲		
President Name Paul Zheng			Vice-President Name Louis Yip				
Street Address 17 watermark Dr			Street Address 71 Wingate Rd				
^{City} Tiverton	State RI	^{Zip} 02878	City Providence	State RI	Zip 02906		
Secretary Name Tze Ping Ng	ı	1	Treasurer Name Eric Leung				
Street Address 76 Middle Rd			Street Address 3 Lori Ann Dr				
Crty East Greenwich	State RI	^{Zip} 02818	^{Cıty} Lincoln	State RI	7jp 02865		
8. List ALL directors (names and ac	dresses). RI Corp	orations MUST lis		e box to indicate an a	attachment		
Director Name Louis Yip			Director Name Tze Ping Ng				
Street Address 71 Wingate Rd			Street Address 76 Middle Rd				
^{City} Providence	State RI	^{Zip} 02906	City East Greenwich	State RI	Zıp 02818		
Director Name James Sung	•		Director Name Eric Leung				
Street Address 2 Carriage Dr			Street Address 3 Lori Ann Dr				
City Lincoln	State RI	^{Zip} 02865	^{Crty} Lincoln	State RI	Zip 02865		
9. The Registered Agent informatio	n of record with th	e RI Department o	of State is accurate. Changes require	filing Form 641.			
Under penalty of perjury, I declar statements, and that all statemen			this report, including any accomp	panying schedule	s and		
This report must be signed by either the Pres	sident, Vice-President, S	Secretary, Assistant Sec	retary. Treasurer, duly Authorized Representat	tive, Receiver or Trustee	•		
Name of Officer/Authorized Repres	entative		ELFO	Date 4/1/2024			
Signature of Officer/Authorized Representative							

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov BY 825WL