RI SOS Filing Number: 202454005640 Date: 5/7/2024 1:23:00 PM



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

Annual Report for the year:

Non-Profit Corporation

-> Filing period: February 1 - May 1

N3-
110
35 0.0
770
SOC S
0:4 0:4 0:4
₽`

→ Filing Fee: \$20.00 → Penalty: Additional \$25.00 fee	if form is not filed b	y May 31.		i	20	
1. Entity ID Number	2. Exact name of the Corporation					
000028826	Christian Action Center, Inc.					
3. State of Incorporation	5. Brief description of the character of business conducted in Rhode Island					
RI	Organize a Community Meal Program in Newport, producing a monthly					
4. NAICS Code	calendar and paying for food as needed. We work in collaboration with					
813319	over twenty churches, social service agencies and a synagogue.					
6. Principal Office Address		_ -	City	State	Zip	
P.O. Box 4846			Middletown	RI	02842	
7. List ALL officers (names and ac	ldresses)			Check the box to indicate	an attachment 🗸	
President Name			Vice-President Name	Vice-President Name		
Street Address			Street Address	Street Address		
City	State	Zip	City	State	Zip	
Secretary Name			Treasurer Name	Treasurer Name		
Street Address			Street Address	Street Address		
City	State	Zip	City	State	Zip	
8. List ALL directors (names and a	ddresses). Rl Co	rporations MUS	ST list at least THREE directors.	Chack the hay to indicat	o an attachment	
Director Name			Director Name	Check the box to Indicate an attachment		
Street Address			Street Address			
City	State	Zip	City	State	Zip	
Director Name			Director Name	Director Name		
Street Address			Street Address			
City	State	Zip	City	State	Zip	
9. The Registered Agent information	on of record with t	he Ri Departm	ent of State is accurate. Change	s require filing Form 6	41.	
Under penalty of perjury, I decla statements, and that all stateme				accompanying sche	dules and	
This report must be signed by either the Pre	sident, Vice-President,	Secretary, Assista	nt Secretary, Treasurer, duly Authorized R	Representative, Receiver or 1	rustee.	
Name of Officer/Authorized Representative				Date		
Christine Fagan				5/1/2024	4	
Signature of Officer/Authorized Re	presentative		, FILED			
MAIL TO:	<u> </u>	 -			 	

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.n.gov

1:23

FORM 531 Revised: 1,92023

Entity ID Number: 000028826

Exact Name of Corporation: Christian Action Center, Inc.

Secretarial Certificate

7. List ALL officers

The Christian Action Center, Inc. was incorporated in 1971 and for an unknown reason the group stopped filing annual reports starting in 1992, causing our incorporation status to be revoked. Recently, we decided to change our bank account to another bank. At that time we were told we needed to provide our incorporation documentation. We did not know what that was, but were told to contact the RI Office of the Secretary of State. When we did that, we were informed that our corporate status had been revoked.

We have since initiated a good faith effort, cooperating and taking steps to correct this oversight. This situation we are facing was festering well prior to the current board's involvement or knowledge. No one currently on the board had any idea that filing an annual report was required to maintain our incorporation status in the State of Rhode Island. Regrettably, a search of historical documentation for Community Action Center, Inc. did not yield documentation referencing the revocation or the names and addresses of previous Christian Action Center board members. Therefore, we are filing all the annual reports with the information that we do know based on the current board members.

8. List ALL directors

Same as stated above.

Name of Secretary: Christine Fagan

Date: 5/1/2024

Sianatura