



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

→ Filing Fee: \$20.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

JUL 15 2024

1448

1. Entity ID Number 000335864		2. Exact name of the Corporation Liberian Ministerial Fellowship of RI			
3. State of Incorporation Rhode Island		5. Brief description of the character of business conducted in Rhode Island We do non-profit service/assurances to Liberians and minority in the Providence area, its surrounding, and Liberia.			
4. NAICS Code 813110-Religious Organi.					
6. Principal Office Address 134 Bridgham Street			City Providence	State RI	Zip 02909
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Morris S. Bryant			Vice-President Name None		
Street Address 59 Rankin Avenue			Street Address		
City Providence	State RI	Zip 02908	City	State	Zip
Secretary Name Lester K. Manly			Treasurer Name Ezekiel S. Parkar		
Street Address 37 Donelson Street			Street Address 209 East Street, Apt. #2		
City Providence	State RI	Zip 02908	City Pawtucket	State RI	Zip 02860
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment <input type="checkbox"/>					
Director Name Matthew N. Kai			Director Name Jemima K. Bryant		
Street Address 131 Clay Street			Street Address 315 Aqueduct Road		
City Pawtucket	State RI	Zip 02860	City Cranston	State RI	Zip 02910
Director Name Louise S. Ireland			Director Name None		
Street Address 194 Salina Street			Street Address		
City Providence	State RI	Zip 02908	City	State	Zip
9. The Registered Agent information of record with the RI Department of State is accurate. Changes require filing Form 641.					
Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.					
This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee					
Name of Officer/Authorized Representative Bishop Morris S. Bryant				Date 07/02/2024	
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