



**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 2025: 2025

1. Corporate ID No. 000952701

2. Name of Corporation Ocean State Church of Christ

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: 40 OLD LOUISQUISSET PIKE

UNIT 702

City or Town: NORTH SMITHFIELD

State: RI Zip: 02896 Country: USA

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

TO PROMOTE, ENCOURAGE AND ENGAGE IN THE DISSEMINATION OF CHRISTIAN RELIGIOUS AND MORAL TEACHING AND INSTRUCTION INCLUDING PREACHING THE GOSPEL OF JESUS CHRIST TO ALL NATIONS AND SERVING THE POOR AND NEEDY; TO ENGAGE THE SERVICES OF MEN AND WOMEN TO CARRY OUT THE MINISTRY OF JESUS CHRIST; AND TO COLLECT AND MAKE DONATIONS FOR THE PURPOSES OF ADVANCING CHRISTIAN RELIGIOUS INSTRUCTION, MISSIONARY AND CHARITABLE WORKS.

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
DIRECTOR	JIMMY ALLEN	40 OLD LOUISQUISSET PIKE, UNIT 702 NORTH SMITHFIELD, RI 02896 USA
DIRECTOR	DAVID SAM	1 WAYLAND AVENUE, UNIT 214N PROVIDENCE, RI 02906 USA
DIRECTOR	PAULO MARTINS	469 OLD RIVER ROAD MANVILLE, RI 02838 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**

JIMMY ALLEN 40 OLD LOUISQUISSET PIKE, UNIT 702 NORTH SMITHFIELD , RI 02896

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

Signed this 16 Day of January, 2025 at 11:49:45 AM 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 KELLI SMITH
Signature of Authorized Person

Form No. 631
Revised 09/07

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