



State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: **2025**

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.

1. Entity ID Number 113031		2. Exact name of the Corporation Chinese Christian Cemetery of Rhode Island			
3. State of Incorporation Rhode Island		5. Brief description of the character of business conducted in Rhode Island To purchase and sell estate for burial purpose only			
4. NAICS Code 813110-Religious Organ					
6. Principal Office Address 333 Roosevelt Ave			City Pawtucket	State RI	Zip 02860
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐					
President Name Louis Yip			Vice-President 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	Zip 02818
Secretary Name Paul Zheng			Treasurer Name Eric Leung		
Street Address 17 Watermark Dr			Street Address 3 Lori Ann Dr		
City Tiverton	State RI	Zip 02878	City Lincoln	State RI	Zip 02865
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an 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	Zip 02818
Director Name James Sung			Director Name Paul Zheng		
Street Address 2 Carriage Dr			Street Address 17 Watermark DR		
City Lincoln	State RI	Zip 02865	City Tiverton	State RI	Zip 02878
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 Louis Yip				Date 3/11/25	
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

FILED

MAR 25 2025

BY

FORM 631- Revised 12/2023