



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.

1. Entity ID Number 000028483		2. Exact name of the Corporation MIDDLETOWN BAPTIST CHURCH			
3. State of Incorporation Rhode Island		5. Brief description of the character of business conducted in Rhode Island CHURCH/RELIGION TITLE: 7-6			
4. NAICS Code 813110					
6. Principal Office Address 1818 West Main Rd			City Middletown	State RI	Zip 02842
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Gary Whitney			Vice-President Name		
Street Address 8 Greene Lane			Street Address		
City Middletown	State RI	Zip 02842	City	State	Zip
Secretary Name Lisa Whitney			Treasurer Name Andrew Kloewer		
Street Address 8 Green Lane			Street Address 93 Lepes Rd		
City Middletown	State RI	Zip 02842	City Tiverton	State RI	Zip 02878
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 Joshua Cuellar			Director Name Montana Casper		
Street Address 28 Harbor Village Drive Apt #4			Street Address 819 Acquidneck Ave		
City Middletown	State RI	Zip 02842	City Middletown	State RI	Zip 02842
Director Name Lisa Whitney			Director Name		
Street Address 8 Green Lane			Street Address		
City Middletown	State RI	Zip 02842	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 Gary Whitney				Date 3/1/25	
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

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BY IBELIA