



State of Rhode Island
Department of State - Business Services Division

REC'D RHODES BSD
15 APR 17 PM 3:52:10

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 001689678		2. Exact name of the Corporation The INTERNATIONAL Church of the Men of SAINT Joseph	
3. State of Incorporation R.I.		5. Brief description of the character of business conducted in Rhode Island The CORPORATION IS ORGANIZED AS A Church UNDER THE INTERNAL Revenue Code Section 501(C)(A) WITH AN INTERNATIONAL OUTREACH INVOLVING Men's Ministries IN addition the ministry includes PRAYER.	
4. NAICS Code 813110			
6. Principal Office Address 218 Paris Irons Rd.		City Glocester	State R.I.
		Zip 02814	
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
President Name Donald Turbit		Vice-President Name	
Street Address 218 Paris Irons Rd		Street Address	
City Glocester	State R.I.	Zip 02814	
Secretary Name		Treasurer Name	
Street Address		Street Address	
City	State	Zip	
City	State	Zip	
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 John Olobr		Director Name Lucien Laport	
Street Address 209 Ridge Rd.		Street Address 17A Poppin John Lane	
City Smithfield	State R.I.	Zip 02917	
City Coventry	State R.I.	Zip 02816	
Director Name Steven Nolan		Director Name	
Street Address 318 Old River Rd.		Street Address	
City Mauville	State R.I.	Zip 02838	
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.			
<small>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.</small>			
Name of Officer/Authorized Representative Donald Turbit			Date 4-17-25
Signature of Officer/Authorized Representative <i>Donald Turbit</i>			BY YJ/KAB

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov