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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	2. Exact name of the Corporation
000138014	City OF Christ International Church
3. State of Incorporation: Rhode Island	5. Brief description of the character of business conducted in Rhode Island: CHURCH - Serving the Community with a spiritual and empowering purpose Teaching Christian Values and Principles
4. NAICS Code: 813110	

6. Principal Office Address	City	State	Zip
92 Broad Street	Cumberland	RI	02864

7. List ALL officers (names and addresses) — Check the box to indicate an attachment ☐

President Name: Augustine A. Makoe			Vice-President Name		
Street Address: 397 East Ave.			Street Address		
City: Pawtucket	State: RI	Zip: 02860	City	State	Zip
Secretary Name: Paul J. Chagnon			Treasurer Name: Georgia J. Duncan		
Street Address: 18 Coyle Ave 3rd Flr.			Street Address: 161 Whitford Ave		
City: Pawtucket	State: RI	Zip: 02860	City: Providence	State: RI	Zip: 02908

8. List ALL directors (names and addresses). RI Corporations **MUST** list at least **THREE** directors. — Check the box to indicate an attachment ☐

Director Name: Malia A. Diggs			Director Name: Augustus Duncan, Sr.		
Street Address: 1611 Pennington Rd.			Street Address: 161 Whitford Ave		
City: Philadelphia	State: PA	Zip: 19151	City: Providence	State: RI	Zip: 02908
Director Name: Henry K. Wennie			Director Name		
Street Address: 57 Hilton St.			Street Address		
City: Pawtucket	State: RI	Zip: 02860	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	Date
Georgia J. Duncan	6-5-25

Signature of Officer/Authorized Representative: Georgia J. Duncan

FILED
JUN 05 2025
BY 835CR

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

FORM 631- Revised 12/2023