



State of Rhode Island **Department of State - Business Services Division**

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Annual Report for the year: 2025

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→ Filing period: February 1 - May 1
 → Filing Fee: \$20.00

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→ Penalty: Additional \$25.00 fee if	form is not filed by	May 31.								
1. Entity ID Number 000026999	2. Exact name of the Corporation The Baptist Home of Rhode Island									
3. State of Incorporation	5. Brief description of the character of business conducted in Rhode Island Providing for the spiritual well-being of elderly members of The Bap									
4. NAICS Code 813219	Church in Rh	Church in Rhode Island and others.								
6. Principal Office Address		·	City	State	Zip					
54 Exeter Road			Exeter	RI	02822					
7. List ALL officers (names and addresses) Check the box to indicate an attachment										
President Name David Coon		-	Vice-President Name							
Street Address 96 Lantern Lan	e		Street Address							
^{City} Exeter	State RI	^{Zip} 02822	City	State	Zip					
Secretary Name Mark DiLuglio			Treasurer Name Frederick C. Eckel, Jr.							
Street Address 355 Elmdale Ro	oad		Street Address 41 Grove Ave.							
^{City} Scituate	State RI	^{Zip} 02857	^{City} Westerly	State RI	^{Zip} 02891					
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment										
Director Name David Coon			Director Name Frederick C. Eckel, Jr.							
Street Address 96 Lantern Lan	e		Street Address 41 Grove Ave.							
^{City} Exeter	State RI	^{Zip} 02822	^{City} Westerly	State RI	Zip 02891					
Director Name Mark DiLuglio			Director Name Donna Sherman							
Street Address 355 Elmdale Ro	ad		Street Address 246 Richardson Road							
^{City} Scituate	State RI	^{Zip} 02857	City Coventry	State RI	Zip 02816					
9. The Registered Agent information	n of record with th	e RI Department	of State is accurate. Changes require	e 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										
Frederick C. Eckel, Jr. 6/3/26										
Signature of Officer/Anthorized Representative FILED										

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov JUN 06 2025

BY_LKS 11:57am

-FORM 631- Revised: 12/2023

Attachment to Annual Report The Baptist Home of Rhode Island Board of Directors

Cindy Bellisle 1070 Ten Rod Road Exeter, RI 02822

Steve Girard 10 South Woodland Road North Scituate, RI 02857

Deb Nordstrom 88 Southwest Ave. Jamestown, RI 02835

Idela Wilson 900 Post Road, Apt. 30 Warwick, RI 02888

Michael Moore 5 Oak Street Coventry, RI 02816

Ron Provencal 52 Donna Drive Cranston, RI 02921