

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street

Providence, RI 02904-2615 401.222.3040

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2010

Filing Period: June 1 - June 30 • Filing Fee: \$20.00* • THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.

* In accordance with R.I.G.L. 7-6-94, each corporation failing or refusing to file its annual report within the time prescribed by law (R.I.G.L. 7-6-91) is subject to a

penalty fee of \$25.00.						
1. Corporate ID No.	1 '	2. Name of Corporation				
28094	CALVARY	COVENANT CHURCH				
3. State of Incorporation	t. Corporate aa	1. Corporate address in Rhode Island - Street Address			Zip	
R.I.	122 LAUR	ENS ST.		CRANSTON	02910	
5. Foreign corporation. Ente	er principal office addre	58	City	State	Zip	
6. Brief Description of the char	racter of the affairs whi	ch are actually conducted in Ri	bode Island			
CHURCH						
7 NAMES AND ADDRESS	SEER OF THE OF	DICEBS (EVE DOV DOD)	THE CHARLES TO THE LINE OF A	and then one views a seems.	^~~~	
7. NAMES AND ADDRE	ESSES OF THE OF	FICERS: ("X" BOX FOR A	TTACHMENT)	CES BEFORE USING ATTAC	CHMENTS	
HENRY BELANGER	/ CHAIDMAN		Vice President Name			
Street Address	/ CHAIRWAIN		ANDRE THOMAS / VICE CHAIR			
79 SHEFFIELD RD.			Street Address 254 GREENWOOD ST.			
City	State	Ζiþ	City	State	Zip	
CRANSTON	RI	02920	CRANSTON	RI	02910	
Secretary Name	-		Treasurer Name	******	***	
ELINOR CARRIERE			WILLIAM McARDLE			
Street Address			Street Address			
100 ARTHUR ST. A	APT. III		117 WENDALL ST.			
City	State	Zip	City	State	Zip	
CRANSTON	RI	02910	WARWICK	RI	02888	
			ATTACHMENT) FILL IN SPA			
	ECTORS OF A DO	MESTIC (RHODE ISLA	ND) CORPORATION SHALL	NOT BE LESS THAN THRE	E <u>E</u> (3). R.I.G.L. 7-6-23	
Director Name			Director Name			
WILLIAM ERICKSON			LOIS GUERTIN			
Street Address			Street Address			
66 BRYANT RD.			15 SPRUCE ST			
City	State	Zip	Сйу	State	Zip	
CRANSTON	RI	02910	CRANSTON	RI	02910	
Director Name			Director Name			
ELINOR CARRIERE						
Street Address			Street Address			
100 ARTHUR ST. AF	· · · · · · · · · · · · · · · · · · ·			· · · · · · · · · · · · · · · · · · ·		
City	State	Zip	Ctty	State	Zip	
CRANSTON	RI	02910	I	I	l	
9. REGISTERED AGENT	I IN RHODE ISLA	ND				
This information is curre	ently of record in th	e Office of the Secretary	of State. Changes require filing of	of Form 641 - R.I.G.L. 7-6-13	3/7-6-78	
This report	must be signed by	either the President, Vic	e President, Secretary, Assista	nt Secretary, Treasurer, Rec	eiver or Trustee	

File Date	PILED				
Check No.	AUG 2 5 2010				
Ву:	Ву				
FOR SEC	CRETARY OF STATE USE ONLY				
	125 9				

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/7

anger Date

HENRY BELANGER

Print or Type Name of Officer

CHAIRMAN

Title of Officer

Signature of Officer

Form 631 Rev. 09/17