



State of Rhode Island and Providence Plantations  
 Department of State - Business Services Division

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RECEIVED  
 SECRETARY OF STATE  
 CORPORATIONS DIV

Non-Profit Corporation Annual Report for the year: 2016

2016 JUN 16 PM 3:47

Filing period: June 1 - June 30

Filing Fee: \$20.00 \*FAILURE TO FILE THIS REPORT BY JULY 30 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID Number <u>1654974</u>		2. Exact name of the Corporation <u>Victory Praise &amp; Worship Center</u>	
3. State of Incorporation <u>Rhode Island</u>		4. Brief description of the character of business conducted in Rhode Island <u>Religious organization</u>	
5. Principal Office Address <u>65 Narragansett Ave</u>		City <u>Providence</u>	State <u>RI</u>
		Zip <u>02907</u>	
6. List ALL officers (names and addresses) <input type="checkbox"/> Check the box to indicate an attachment			
President Name <u>Derrick S Jones</u>		Vice-President Name <u>Gerald White</u>	
Street Address <u>149 Hanover St.</u>		Street Address <u>18 Redwing Street</u>	
City <u>Providence</u>	State <u>RI</u>	City <u>Providence</u>	State <u>RI</u>
Zip <u>02904</u>		Zip <u>02907</u>	
Secretary Name <u>Tyan M. Jones</u>		Treasurer Name <u>Shirley Odufanade</u>	
Street Address <u>14 Park Drive</u>		Street Address <u>315 Elmwood Ave 2C</u>	
City <u>Riverside</u>	State <u>RI</u>	City <u>Providence</u>	State <u>RI</u>
Zip <u>02915</u>		Zip <u>02907</u>	
7. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. <input type="checkbox"/> Check the box to indicate an attachment			
Director Name <u>Derrick S. Jones</u>		Director Name <u>Gerald White</u>	
Street Address <u>149 Hanover St.</u>		Street Address <u>18 Redwing Street</u>	
City <u>Providence</u>	State <u>RI</u>	City <u>Providence</u>	State <u>RI</u>
Zip <u>02904</u>		Zip <u>02907</u>	
Director Name <u>Tyan M. Jones</u>		Director Name <u>Shirley Odufanade</u>	
Street Address <u>14 Park Drive</u>		Street Address <u>315 Elmwood Ave 2C</u>	
City <u>Riverside</u>	State <u>RI</u>	City <u>Providence</u>	State <u>RI</u>
Zip <u>02915</u>		Zip <u>02907</u>	
8. Registered Agent in Rhode Island. This information is current, of record in the Department of State. Changes require filing Form 641.			
<b>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.</b>			
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 <u>Tyan Jones</u>		Date <u>6/16/2016</u>	
Signature of Officer/Authorized Representative <u>Tyan Jones</u>		SIGN DOCUMENT HERE	

**FILED**  
 JUN 16 2016  
 By 276868  
A.A.