



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
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 2007

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. 27488		2. Name of Corporation Franciscan Missionaries of Mary			
3. State of Incorporation RHODE ISLAND		4. Corporate address in Rhode Island - Street Address 399 Fruit Hill Avenue		City N. Providence	Zip 02911
5. Foreign corporation. Enter principal office address		City		State	Zip
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island GENERAL MISSIONARY WORK AND CARE OF THE SICK.					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Mary Motte, F.M.M.			Vice President Name Cristina Sanchez, F.M.M.		
Street Address 3305 Wallace Avenue			Street Address 399 Fruit Hill Avenue		
City Bronx	State New York	Zip 10467	City N. Providence	State R.I	Zip 02911
Secretary Name Carmen Perez, F.M.M.			Treasurer Name Noreen Murray, F.M.M.		
Street Address 3305 Wallace Avenue			Street Address 3305 Wallace Avenue		
City Bronx	State New York	Zip 10467	City Bronx	State New York	Zip 10467
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23					
Director Name Lois Ann Pereira, F.M.M.			Director Name Pauline Williams, F.M.M.		
Street Address 284 Foster Street			Street Address 399 Fruit Hill Avenue		
City Brighton	State MA	Zip 02135	City N. Providence	State RI	Zip 02911
Director Name Yvette Hubert, F.M.M.			Director Name		
Street Address 399 Fruit Hill Avenue			Street Address		
City N. Providence	State RI	Zip 02911	City	State	Zip
9. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78					
Agent Name ALBERT B. WEST			Address		
Address 3460 MENDON ROAD			City CUMBERLAND	Zip 02864	

This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



27488

FILED

File Date

SEP 12 2007

Check No.

By: **By 12916: 11016**

FOR SECRETARY OF STATE USE ONLY

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.

Noreen Murray
Signature of Officer

8/21/07
Date

Noreen Murray, F.M.M.
Print or Type Name of Officer

Treasurer
Title of Officer