

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

401.222.3

Piling 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

* The 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.	2. Name of Corporation				
28807	Our Lady of Mercy Greenwich Rhode Island				
3. State of Incorporation	4. Corporate address in Rbode Island - Street Address			City	Zip
Rhode Island	65 Third S	Street		East Gree	nwich OL818
5. Foreign corporation. Enter princ	cipal office address		City	State	Zip
6. Brief Description of the character of	of the affairs which are act	tually conducted in Rbode Isla	nd		•
7 NAMES AND ADDRESSES	OF THE OFFICERS	· /*Y" BOY FOR ATTACH	MENTO THE FILL IN SPACES RE	FORF USING A	TTACHMENTS
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACK President Name			Vice President Name		
Most Rev. Thomas J. Tobin, D.D.			Rev. Msgr. Paul D. Theroux		
Street Address			Street Address		
1 Cathedral Sq	uare		1 Cathedral Square		
City	State	Zip	City	State	Zip
Providence	RI	02903	Providence	RI	02903
Secretary Name			Treasurer Name		
Rev. John W. L	olio		Rev. John W. Lolio		
Street Address	_		Street Address		
65 Third Stree	t		65 Third Street		
City	State	Zip	City	State	Zip
East Greenwich	RI	02818	East Greenwich	RI	02818
			HMENT) FILL IN SPACES B		
	ORS OF A DOMESTI	C (RHODE ISLAND) C	ORPORATION <u>SHALL NOT B</u>	E LESS THAN	THREE (3). R.I.G.L. 7-6-23
Director Name			Director Name William Wray		
Peter J. Bongiorni					
Street Address 83 Blueberry Drive			Street Address 93 Cara Court		
-	*	1		T -	
<i>c</i> w East Greenwich	State RI	<i>Σφ</i> 02818	City Nowth Vincatory	State RI	<i>Σ</i> φ 02852
	KT	02010	North Kingstown	KI	02632
Orrector Name Rev. John W. Lolio			Director Name		
Street Address			Street Address		
65 Third Stree	t				
City	State	Ζip	City	State	Zip
East Greenwich	RI	02818			
9. REGISTERED AGENT IN I	RHODE ISLAND - D	D NOT ALTER - Chang	es require filing of Form 64	i - R.I.G.L. 7-6	13 / 7-6-78
Agent Name			Address		
Rev. John W. L	olio		•		
Address			City	Zip	
65 Third Street			East Greenwich 02818		
This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee					
This report must	be signed by either ti	he President. Vice Presi	dent, Secretary, Assistant Secre	etary. Treasurer.	Receiver or Trustee

Tule of Officer

File Date FILED	
Check No	_
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 co	orrect.
Rev- July W-	Loli 6-5-08
Signature of Officer	Date
Rev. John W.	Lolis
Print or Type Name of Officer	
Secretary-Tre	a surer

Form 631 Rev. 12/06