

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

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.

| to a penatty fee of \$25.00. | | | | | | | | |
|--|--|---|---|--|--|--|--|--|
| 1. Corporate ID No. | 2. Name of Corporat | ion | | | | | | |
| 29355 | St. E | St. Edward's Church of Pawtucket | | | | | | |
| 3. State of Incorporation | 4. Corporate address | 4. Corporate address in Rhode Island - Street Address | | | Ζψ | | | |
| Rhode Island | 58 Ha | ancock St. | | Pawtuck _* | et 02860 | | | |
| 5. Foreign corporation. Enter principal office address | | | City | State | Zip | | | |
| 8. Brief Description of the charac | eter of the affairs which ar | e actually conducted in Rhode | le Bland | | | | | |
| . Brief Description of the Charac | лет ој пле идјинх игаса иг | e ucinanty commission in human | - Zinanta | | | | | |
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| 7. NAMES AND ADDRESS | SES OF THE OFFICE | ERS: ("X" BOX FOR ATTA | CHMENT) [FILL IN SPACES | BEFORE USING A | TTACHMENTS | | | |
| President Name | | | Vice President Name | | - . | | | |
| Most Rev. Thomas J. Tobin | | | | sgr. Paul D | . Theroux | | | |
| Street Address | | | Street Address One Cathedral Square | | | | | |
| | thedral Squar | | | | | | | |
| City | State | Zip | Providence | RI | 02903 | | | |
| Providence | RI | 02903 | Treasurer Name | 1 111 | 1 02000 | | | |
| Secretary Name | | | | | | | | |
| Theodore S. King | | | Rev. Charles H. Galligan | | | | | |
| | | | Steart Address: | | 58 Hancock Street | | | |
| Street Address | | | Street Address 58 Hancock | Street | | | | |
| itreet Address 522 Powe | | Ζψ | | Street | Zip | | | |
| Street Address 522 Powe City | er road State | <i>Ζψ</i> | 58 Hancock | State | | | | |
| Street Address 522 Powe City | er road State | 1 | 58 Hancock | State | | | | |
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| | This report must be signed by either the Presiden | t, vice Flexident, Se | celetary, Assistant Societary, Heastiel. Rec | ervor or Trustee |
|--------------------------------|---|-------------------------|---|------------------------------|
| File Date _ Check No By: | FILED AUG 2 0 2008 By 3 3 4 7:6 W | OS OUA BOOS | Under penalty of perjury, I declare and affirm report, including any accompanying schedules statements contained herein are true and correct statements of officer Rev. Charles H. Galligan Print or Type Name of Officer Treasurer (Priest) | and statements, and that all |
| F. S. F. | OR SECRETARY OF STATE USE ONLY | PECELVEL SOLVANIANON | Tile of Officer | Form 631 Rev. 12/06 |