



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
118 W. River Street
Providence, RI 02901-2615
(401) 222-3000

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

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. 30375		2. Name of Corporation St. Mary's Church in Warwick	
3. State of Incorporation RI		4. Corporate address in Rhode Island - Street Address 358 Warwick Neck Ave	
		City Warwick	Zip 02889
5. Foreign corporation. Enter principal office address		City	State
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island Church			
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name Susan Farrell		Vice President Name Mike Marsh	
Street Address 72 Barton Ave		Street Address 11 Hackman Place	
City Warwick	State RI	City Warwick	Zip 02889
Secretary Name Denise Wilkinson		Treasurer Name Dave McIntyre	
Street Address 231 Fair St.		Street Address 81 Leroy Ave	
City Warwick	State RI	City Warwick	Zip 02889
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 Kristen Marcks		Director Name Judy Robinson	
Street Address 51 Ninth Ave		Street Address 13 Thirteenth Ave	
City Warwick	State RI	City Warwick	Zip 02886
Director Name Tom McMullen		Director Name Frank Walker	
Street Address 219 Fair St		Street Address 87 General Hawkins Dr.	
City Warwick	State RI	City Warwick	Zip 02888
9. REGISTERED AGENT IN RHODE ISLAND			
This information is currently of record in the Office of the Secretary of State. Changes require filing of Form 641 - R.I.G.L. 7-6-13/7-6-78			

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

FILED

MAY 22 2009

By 090122

FML

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.

Signature of Officer: [Signature] Date: 4-1-09
Print or Type Name of Officer: Mike Marsh
Title of Officer: Senior Warden (President)

File Date _____
Check No. _____
By: _____
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