

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street Providence. RI 02904-2615

2009 NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

401.222.3040

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.	2. Name of Corporation						
30166	St. Joseph's Church, Ashton, Rhode Island						
3. State of Incorporation Rhode Island	4. Corporate address in Ri 1303 Mendon	bode Island - Street Address Road (P.O. Bo	x 7005)	Cumberland RI	<sup>Zip</sup> 02864		
5. Foreign corporation. Enter principal office address			City	State	Zip		
NA					1		
6. Brief Description of the character of	of the affairs which are acti	ially conducted in Rhode Isla	nd	4	<u> </u>		
TO CONDUCT THE R	OMAN CATHOLIC	CHURCH					
7. NAMES AND ADDRESSES	OF THE OFFICERS:	("X" BOX FOR ATTACHA	<i>HENT)</i>	FORE USING ATTACH	MENTS		
President Name Thomas J. Tobin, D.D.			Vice President Name Rev. Msgr. Paul D. Theroux				
Street Address 1 Cathedral Square			Street Address 1 Cathedral Square				
City	State	Zip	City	State	Zip		
Providence	Rhode Island	029.03	Providence	Rhode Island	02903		
Secretary Name			Treasurer Name				
Eev. John W. Hunt			Rey. John W. Hunt				
Street Address 1303 Mendon Road (P.O. Box 7005)			Street Address 1303 Mendon Road (P.O. Box 7005)				
City	State	Zip	City	State	Zip		
Cumberland	Rhode Islan	d 02864	Cumberland	Rhode Island	02864		
8. NAMES AND ADDRESSES	OF THE DIRECTOR	S: ("X" BOX FOR ATTAC	HMENT) TILL IN SPACES BE	FORE USING ATTACH	MENTS		
THE NUMBER OF DIRECTO							
Director Name Frank Champi			Director Name Rev. John W. Hunt				
Street Address 16 Cedar Way			Street Address Mendon Road (P.O. Box 7005)				
<sup>City</sup> Cumberland	Sthode Island	<sup>Z⊕</sup> 02864	Cuy Cumberland	State Rhode Island	<sup>Zip</sup> 02864		
Director Name Mrs. Therese Tougas			Director Name				
Streef Address 44 Forestdale Drive			Street Address				
City	State	Zip	City	State	Zip		
Cumberland 9. REGISTERED AGENT IN I	Rhode Island	02864			•		
This information is currently o	f record in the Office	of the Secretary of State.	Changes require filing of Form	641 - R.I.G.L. 7-6-13/7-6	5-78		
This report must	he signed by either th	a President Vice Presi	dent Socratory Assistant Socra	. 27 .			

ort must be signed by either the President. Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

File Date	FILED
Check No	JUN 02 2009
Ву:	By 20512
FOR S	SECRETARY OF STATE USE ONLY

onder penany of perjury, I declare and arrirm that	t i have o	examined	this
eport, including any accompanying schedules and	statemen	ts, and tha	at all
statements contained herein are true and correct.	_		
le John W Heint	Ju	ne 1,	2009
ignature of Officer	0	Date	— '
(Rev.) John W. Hunt			

Print or Type Name of Officer

Secy/Treas