

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, Rt 02904-2615
401,222,3010

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2009

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. l. Corporate ID No. 2. Name of Corporation 30247 St. Luke's Parish Diocese of Rhode Island State of Incorporation 4. Corporate address in Rhode Island - Street Address Rhode Island 670 Weeden Street Pawtucket 02860 5. Foreign corporation. Enter principal office address City State Zip6. Brief Description of the ebaracter of the affairs which are actually conducted in Rhode Island Religious Organization 7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) [FILL IN SPACES BEFORE USING ATTACHMENTS President Name Vice President Name Robert Lundgren Dana Robinson Street Address Street Address 31 Ash Street 52 Arthur Street State City State **Pawtucket** RΙ 02860 RI 02904 North Providence Secretary Name Treasurer Name Barbara Partington Barbara Stevenson Street Address Street Address 25 Francis Avenue 9 Tucker Lane City State Zip CHY State Zip Pawtucket RI 02860 Lincoln RI 02865 8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) 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 Carol O'Connor Paul O'Toole Street Address Street Address 25 Grandview Avenue 75 Baldwin Street City State State Ζįρ **Pawtucket** RI 01860 **Pawtucket** RI 02860 Director Name Lynn Corrigan Samantha Tellu Street Address Street Address 699 Weeden Street 207 Francis Avenue State Zip City State Zip **Pawtucket** RI 02860 l Pawtucket RI 02860 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

File Date	ED
Check No. JUN 0	9 2009
J	TS 6 RY OF STATE USE ONLY

30247

Under penalty of perjury, I declare and report, including any accompanying sche statements contained herein are true and	dules and statements, and that all correct.
Signature of Officer	Date
Barbara Stevenson	
Print or Type Name of Officer	
Treasurer	
Title of Officer	•

Form 631 Rev. 09/17