

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street

Providence. RI 02904-2615

## NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2009

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 negative for of \$75,00

penaity jee of \$25.00.						
1. Corporate ID No.	2. Name of Corporation	w C w - 2 .	45.4.56.6.54			
29081	CHUKCH	OF BOK I	ADY OF GRA	<u>ce</u>	T.	
3. State of Incorporation  4. Corporate address in Rhode Island - Street Address  R HOBE ISLAND 4 LAFAYETTE STRE  5. Foreign corporation. Enter principal office address			ELT	JOHNSTON	02919	
5. Foreign corporation. Enter principal office address		Сйу	State	Zip		
6. Brief Description of the character of	of the affairs which are actt	ually conducted in Rhode Isla	ind	•	*	
ROMAN CATHOLIC CHURCH						
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT)   FILL IN SPACES BEFORE USING ATTACHMENTS						
President Name		`	Vice President Name			
MOSTREV. THOMAS J. TOBIN			REV. MSGR. PAUL D. THEROUX			
Street Address			Street Address			
ONE CATHEDRAL SQUARE  City PROVIDENCE R  OJG03			ONE CATHEDRAL SQUARE  City PROVIDENCE RI 02903			
City	State	Zip	City	State	Zip	
PROVIDENCE	K I	02909	PROVIDENCE	] KI	02703	
SPCTETATY NAME			Treasurer Name			
REV. MSGR. CARNO F. MONTELANO			REV. MSGR. C	ALLO F. MI	ONTE CALVO	
Street Address			Street Address  4 LA FAYETTE STREET  City  JOHNSTON  RI  02419			
CHV	State	Zip	City	State	Zip	
JUHNSTON	アエ	02919	JOHNSTON	RI	02419	
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			Director Name			
JOHN BUCCI			THEODORE RICHARD			
Street Address			Street Address			
64 WOOD HAVEN BLUD.			/2 BOWEN STREET  City State Zip  TOHNSTON RI 02919			
		Zip	City	State	Zip	
NORTH PROV.	RI	02911	JOHNSTON	RI	02919	
Director Name GRACE. ERRICO			Director Name ALFRED ARSENAULT			
Street Address			Street Address			
			24 MUL BERRY CIRCLE  City  JOHNSTON  RI  02919			
City	State	Zip	City	State	Zip	
JOHNSTON	尺工	02919	I JOHNSTON	尺エ	02919	
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	FILED		
Check No.	JUN 1 0 2009		
Ву:	By 25266		
	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 correct.

Carlo F. Mortecalio

v 6/6/09

REV. MSGR. CARLO F. MONTE CALVO Print or Type Name of Officer

TREASURER