State of Rhode Island and Providence Plantations Fee: \$20.00 Office of the Secretary of State
Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040
Foreign Non-Profit
Annual Report
Filing Period: June 1 - June 30
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.
ANNUAL REPORT YEAR: 2010
1. Corporate ID No. 000107811
2. Name of Corporation CONSOLIDATED CATHOLIC ADMINISTRATIVE SERVICES INC.
3. State of Incorporation
State: <u>NY</u>
4. Corporate Address in Rhode Island
No. and Street: 260 WEST EXCHANGE STREET, SUITE 305-2
City or Town: PROVIDENCE State: RI Zip: 02903 Country: USA
5. Foreign Corporation. Enter Principal Office Address
No. and Street: 50 COLUMBUS AVENUE
City or Town: <u>THORNWOOD</u> State: <u>NY</u> Zip: <u>10594</u> Country:
6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island
PROVIDE ADMINISTRATIVE SERVICES FOR RELIGIOUS NON PROFIT CORPORATIONS TO ENABLE THEM TO OPERATE MORE EFFICIENTLY.
7. Names and Addresses of the Officers and Directors:
All officers and directors must be listed.

Title	Individual Name	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
PRESIDENT	EDUARDO VIGNEAUX	VIA AURELIA 677 ROME 00165 ITA
SECRETARY	FERNANDO SUAREZ	582 COLUMBUS AVENUE THORNWOOD, NY 10594 USA
VICE PRESIDENT	ALEJANDRA RAMIREZ	836 WARWICK NECK AVENUE WARWICK, RI 02889 USA
DIRECTOR	STEPHEN DARDIS	582 COLUMBUS AVENUE THORNWOOD, NY 10594 USA
TREASURER	FERNANDO SUAREZ	582 COLUMBUS AVENUE THORNWOOD, NY 10594 USA
DIRECTOR	FERNANDO SUAREZ	582 COLUMBUS AVENUE THORNWOOD, NY 10594 USA
DIRECTOR	ALEJANDRA RAMIREZ	836 WARWICK NECK AVENUE WARWICK, RI 02889 USA
DIRECTOR	EDUARDO VIGNEAUX	VIA AURELIA 677 ROME, 00165 ITA

8. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78

DANIEL STONE, ESQ. 260 WEST EXCHANGE STREET, SUITE 305-2 PROVIDENCE, RI 02903

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

Signed this 14 Day of May, 2010 at 4:44:12 PM. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By FERNANDO SUAREZ

Signature of Officer of the Corporation

____President or ____Vice President or _____X Secretary or _____Assistant Secretary or

____Treasurer or ____Trustee (check one)

This report cannot be accepted for filing if an officer has executed the form and he/she is not listed in Section 7.

Form No. 631 Revised 09/07

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