

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

Providence, RI 02904-2615

401.222.3040

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2010

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. 30395	2. Name of Corporation St. Matthew Church Corporation				
3. State of Incorporation Rhode Island	· '	tbode Island - Street Address		Cranston	Zip 02910
5. Foreign corporation. Enter principal office address			City	State	Zip
6. Brief Description of the character of	of the affairs which are act	tually conducted in Rhode Isl	and		
Religious					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACH President Name Most Rev. Thomas J. Tobin			MENT) FILL IN SPACES BEFORE USING ATTACHMENTS Vice President Name Most Rev. Robert C. Evans		
Street Address One Cathedral Square			Street Address One Cathedral Square		
Providence	State R I	^{Zip} 02903	Providence	State R I	^{Zip} 02903
Secretary Nume Carol Peterson			Treasurer Name Rev. James R. Collins		
Street Address 28 Bedford Road			Street Address 15 Frances Avenue		
Cranston	State R I	^{Zip} 02910	Cranston	State R I	^{Zip} 02910
8. NAMES AND ADDRESSES					
THE NUMBER OF DIRECTORS OF A-DOMESTIC (RHODE ISLAND) of Director Name Rev. James R. Collins			CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23 Director Name Carol Peterson		
Street Address 15 Frances Avenue			Street Address 28 Bedford Road		
Cranston	State R I	^{Zip} 02910	Cranston	State R I	^{Zip} 02910
Director Name Robert Petron	e	3 111	Director Name		
Street Address 70 Sinclair Avenue			Street Address		
Cranston	State R I	^{2ip} 02910	City	State	Zip
9. REGISTERED AGENT IN	RHODE ISLAND	•		•	•
This information is currently of	of record in the Office	of the Secretary of Stat	e. Changes require filing of Fo	rm 641 - R.I.G.L. 7-6-13	/7-6-78
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This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

File Date FILED
Check No. MAY 2 1 2010
By: By 30495
FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I report, including any accompanying schedules and statements contained herein are true and correct.	
Sychature of Officer) 24/25/ Date
Rev. James R. Collins	
Print or Type Name of Officer	
Treasurer	
Title of Officer	