



**State of Rhode Island and Providence Plantations  
Office of the Secretary of State**

**Fee: \$20.00**

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

**Non-Profit Corporation  
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:** 2011

**1. Corporate ID No.** 000029195

**2. Name of Corporation** Society of St. Vincent de Paul of Providence

**3. State of Incorporation**

State: RI

**4. Corporate Address in Rhode Island**

No. and Street: 525 MAUREEN CIRCLE

City or Town: MAPLEVILLE

State: RI Zip: 02839 Country: USA

**5. Foreign Corporation. Enter Principal Office Address**

No. and Street:

City or Town: State: Zip: Country:

**6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island**

TO PROVIDE CHARITABLE ASSISTANCE TO NEEDY RHODE ISLANDERS THROUGH  
PARISH-BASED CONFERENCES OF THE SOCIETY

**7. Names and Addresses of the Officers and Directors:**

*All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete*

THE NUMBER OF DIRECTORS OF A DOMESTIC(RHODE ISLAND)CORPORATION SHALL NOT BE LESS THAN THREE(3). R.I.G.L. 7-6-23

| <b>Title</b>   | <b>Individual Name</b><br>First, Middle, Last, Suffix | <b>Address</b><br>Address, City or Town, State, Zip Code, Country |
|----------------|-------------------------------------------------------|-------------------------------------------------------------------|
| PRESIDENT      | JAMES PETER MARTUFI                                   | 525<br>MAUREEN CIRCLE, RI 02839 USA                               |
| TREASURER      | VIRGINIA MONAHAN                                      | 71 CLYDE AVENUE<br>EAST PROVIDENCE, RI 02914 USA                  |
| SECRETARY      | SYLVIA SABATINI                                       | 7 SPENCER ROAD<br>GREENVILLE, RI 02828 USA                        |
| PAST PRESIDENT | PATRICIA SICKINGER                                    | 95 LYNNE LANE<br>MAPLEVILLE, RI 02839 USA                         |
| PRESIDENT      | JAMES MARTUFI                                         | 525 MAUREEN CIRCLE<br>MAPLEVILLE, RI 02839 USA                    |
| VICE PRESIDENT | RITA ST. PIERRE                                       | 49 WILLIAMS STREET<br>LINCOLN, RI 02865 USA                       |
| DIRECTOR       | MARY SUE TAVARES                                      | 8 VIALLS DRIVE<br>BARRINGTON, RI 02806 USA                        |
| DIRECTOR       | JAMIE EDWARDS                                         | 37 EDWARDS DRIVE<br>PORTSMOUTH, RI 02871 USA                      |
| DIRECTOR       | ANTHONY ANDREOZZI                                     | 99 BYRON BLVD.<br>WARWICK, RI 02888 USA                           |
| DIRECTOR       | MICHAEL TUTALO                                        | 115 RIDGE STREET<br>PROVIDENCE, RI 02909 USA                      |
| DIRECTOR       | ROLAND LALIBERTE                                      | 30 GARDEN STREET<br>CUMBERLAND, RI 02864 USA                      |

**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**

JAMES MARTUFI 525 MAUREEN CIRCLE MAPLEVILLE , RI 02839-

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

**Signed this 15 Day of June, 2011 at 1:21:14 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 § 7-6.*

By JAMES P. MARTUFI

Signature of Officer of the Corporation

☒ President or ☐ Vice President or ☐ Secretary or ☐ Assistant Secretary or

☐ Treasurer or ☐ Receiver 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.**

