

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 2012

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.

penalty fee of \$25.00.	• •		•				
1. Corporate ID No.	2. Name of Corporation						
30836	Saint Raphael's Ac	Saint Raphael's Academy					
3. State of Incorporation	4. Corporate address in R	bode Island - Street Address		City	Zip		
Rhode Island	One Cathedral So	quare		Providence	02903		
5. Foreign corporation. Enter princ	cipal office address		City	State	Zip		
			:				
6. Brief Description of the character of	of the affairs which are act	ually conducted in Rhode Isla	nd				
Religious, charitable and ed	lucational activities.						
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President Name	OF THE OFFICERS:		Contraction and Contraction of the Contraction of t	FURE USING ALTAUM			
Most Reverend Thomas	I Tobin		Vice President Name				
	J. TODIII		Rev. Msgr. Albert A. Kenney				
Street Address			Street Address One Cathedral Square				
One Cathedral Square	State	Zip	City	State	Zip		
Providence	RI	02903	Providence	RI	02903		
Secretary Name		102300	Treasurer Name				
Rev. Timothy D. Reilly			Most Reverend Thomas J. Tobin				
Street Address			Street Address				
One Cathedral Square			One Cathedral Square				
City	State	Zip	City	State	Zip		
Providence	RI	02903	Providence	RI	02903		
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			ORPORATION SHALL NOT B				
Director Name			Dtrector Name				
Most Reverend Thomas J. Tobin			Rev. Msgr. Albert A. Kenney				
Street Address			Street Address				
One Cathedral Square			One Cathedral Square				
City	State	Zip	City	State	Zip		
Providence	RI	02903	Providence	Ri	02903`		
Director Name			Director Name				
Rev. Timothy D. Reilly			Daniel J. Ferris				
Street Address			Street Address				
One Cathedral Square			One Cathedral Square				
City	State	Zip	City	State	Zip		
Providence	RI	02903	Providence	RI	02903		
9. REGISTERED AGENT IN 1	RHODE ISLAND		A Margaritate Resident and a second a second and a second				
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	he President, Vice Presi	dent, Secretary, Assistant Secr	etary, Treasurer, Receive	er or Trustee		
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Rw Wolfe D Relle Signature of Officer

Rev. Timothy D. Reilly
Print or Type Name of Officer

Secretary
Title of Officer

Form 631 Rev. 09/17