



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State - Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov/business

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR **2013**

Filing Period: June 1 - June 30 • This report must be typed or printed legibly.

Filing Fee: \$20.00 • FAILURE TO FILE THIS REPORT BY JULY 30 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. 29218		2. Exact name of the Corporation Church of Saint Teresa of the Child Jesus, Nasonville			
3. State of Incorporation Rhode Island		4. Brief description of the character of business conducted in Rhode Island Church/Religious			
5. Principal office address 35 Dion Drive		City Harrisville		State RI	Zip 02830
6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name Most Rev. Thomas J. Tobin (Bishop of Providence)			Vice-President Name Most Rev. Robert C. Evans (Auxiliary Bishop of Prov)		
Street Address One Cathedral Square			Street Address One Cathedral Square		
City Providence	State RI	Zip 02903	City Providence	State RI	Zip 02903
Secretary Name Richard Lachapelle			Treasurer Name Rev. Gerard J. Caron		
Street Address 280 Barnes Road			Street Address 35 Dion Drive		
City Harrisville	State RI	Zip 02830	City Harrisville	State RI	Zip 02830
7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name Rev. Gerard J. Caron			Director Name Normand Dalpe		
Street Address 35 Dion Drive			Street Address 1005 Mt. Pleasant Avenue		
City Harrisville	State RI	Zip 02830	City Harrisville	State RI	Zip 02830
Director Name Richard Lachapelle			Director Name		
Street Address 280 Barnes Road			Street Address		
City Harrisville	State RI	Zip 02830	City	State	Zip
8. REGISTERED AGENT IN RHODE ISLAND					
This information is currently of record in the Office of the Secretary of State. Changes require filing Form 641.					

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

File Date _____
Check No _____
By: _____
FOR SECRETARY OF STATE USE ONLY BY 39677

FILED

JUN 04 2013

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.

Rev. Gerard J. Caron 6/3/2013
Signature of Officer Date

Rev. Gerard J. Caron

Print or Type Name of Officer

Pastor/Treasurer

Title of Officer