



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. <u>30886</u>		2. Exact name of the Corporation <u>St. Vincent's Church Corporation, Bradford</u>			
3. State of Incorporation <u>Rhode Island</u>		4. Brief description of the character of business conducted in Rhode Island <u>Religious, Spiritual and Charitable</u>			
5. Principal office address <u>7 Church Street, PO Box 277</u>		City <u>Bradford</u>		State <u>RI</u>	Zip <u>02808</u>
6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name <u>Thomas J. Tobin</u>		Vice-President Name <u>Robert C. Evans</u>			
Street Address <u>One Cathedral Square</u>		Street Address <u>One Cathedral Square</u>			
City <u>Providence</u>	State <u>RI</u>	Zip <u>02903</u>	City <u>Providence</u>	State <u>RI</u>	Zip <u>02903</u>
Secretary Name <u>Mr. Harold Beal</u>		Treasurer Name <u>Rev. David Piacentini</u>			
Street Address <u>23 Sherwood Drive</u>		Street Address <u>169 Main Street</u>			
City <u>Westerly</u>	State <u>RI</u>	Zip <u>02891</u>	City <u>Ashaway</u>	State <u>RI</u>	Zip <u>02804</u>
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 <u>Rev. David Piacentini</u>		Director Name <u>Ms. Lois Antach</u>			
Street Address <u>169 Main Street</u>		Street Address <u>PO Box 1365</u>			
City <u>Ashaway</u>	State <u>RI</u>	Zip <u>02804</u>	City <u>Westerly</u>	State <u>RI</u>	Zip <u>02891</u>
Director Name <u>Mr. Harold Beal</u>		Director Name			
Street Address <u>23 Sherwood Drive</u>		Street Address			
City <u>Westerly</u>	State <u>RI</u>	Zip <u>02891</u>	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

FILED

JUN 14 2013

File Date _____

Check No _____ By MME

By: CR #13831

FOR SECRETARY OF STATE USE ONLY

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. David Piacentini 6/12/13
Signature of Officer Date

Rev. David Piacentini
Print or Type Name of Officer

Treasurer
Title of Officer