



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. 28908		2. Exact name of the Corporation Church of the Assumption of the Blessed Virgin Mary			
3. State of Incorporation		4. Brief description of the character of business conducted in Rhode Island Roman Catholic Church Conducting Religious Services & Ministries to the Needy			
5. Principal office address 791 Potters Avenue		City Providence,		State RI	Zip 02907
6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) ☒					
President Name Thomas J. Tobin (Bishop of Providence)		Vice-President Name Robert C. Evans (Auxiliary Bishop of Providence)			
Street Address One Cathedral Square		Street Address One Cathedral Square			
City Providence	State RI	Zip 02903	City Providence	State RI	Zip 02903
Secretary Name Reverend Gildardo Suarez		Treasurer Name Reverend Gildardo Suarez			
Street Address 791 Potters Avenue		Street Address 791 Potters Avenue			
City Providence	State RI	Zip 02907	City Providence	State RI	Zip 02907
7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) ☐					
Director Name Reverend Gildardo Suarez (Pastor)		Director Name Mr. Erminio Batista (Trustee)			
Street Address 791 Potters Avenue		Street Address 132 Waldo Street			
City Providence	State RI	Zip 02907	City Providence	State RI	Zip 02907
Director Name Mr. Jose Cabrera (Trustee)		Director Name			
Street Address 34 Toronto Avenue		Street Address			
City Providence	State RI	Zip 02907	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

Form No. 631
Revised: 05/2012

FILED

JUN 14 2013

By mmc
CR # 1775

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. Gildardo Suarez 6/11/13
Signature of Officer Date

REVERED GILDARDO SUAREZ
Print or Type Name of Officer

SECRETARY TREASURER
Title of Officer