

JUL 01 2013



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. <b>27269</b>		2. Exact name of the Corporation <b>Jeanne Jugan Residence of the Little Sisters of the Poor</b>			
3. State of Incorporation <b>RI</b>		4. Brief description of the character of business conducted in Rhode Island <b>Care for the aged poor</b>			
5. Principal office address <b>964 Main Street</b>		City <b>Pawtucket</b>		State <b>RI</b>	Zip <b>02860</b>
6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name <b>Sr. Catherine Frain</b>		Vice-President Name <b>Sr. Prisca Goh</b>			
Street Address <b>964 Main Street</b>		Street Address <b>964 Main Street</b>			
City <b>Pawtucket</b>	State <b>RI</b>	Zip <b>02860</b>	City <b>Pawtucket</b>	State <b>RI</b>	Zip <b>02860</b>
Secretary Name <b>Sr. Prisca Goh</b>		Treasurer Name <b>R. Maria Rivera</b>			
Street Address <b>964 Main Street</b>		Street Address <b>964 Main Street</b>			
City <b>Pawtucket</b>	State <b>RI</b>	Zip <b>02860</b>	City <b>Pawtucket</b>	State <b>RI</b>	Zip <b>02860</b>
7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS <b>MUST</b> LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name <b>R. Gertrude Crevan</b>		Director Name <b>R. Emilie Staib</b>			
Street Address <b>964 Main Street</b>		Street Address <b>964 Main Street</b>			
City <b>Pawtucket</b>	State <b>RI</b>	Zip <b>02860</b>	City <b>Pawtucket</b>	State <b>RI</b>	Zip <b>02860</b>
Director Name <b>Sr. Julie Thompson</b>		Director Name			
Street Address <b>964 Main Street</b>		Street Address			
City <b>Pawtucket</b>	State <b>RI</b>	Zip <b>02860</b>	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

**FILED**

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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.

*Sr. Catherine Frain* 6/26/13  
Signature of Officer Date

**Sr. Catherine Frain**  
Print or Type Name of Officer  
**President**  
Title of Officer

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