



**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

**NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2014**

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>30865</b>		2. Exact name of the Corporation <b>Saint Thomas the Apostle Church Corporation of Warren</b>			
3. State of Incorporation <b>Rhode Island</b>		4. Brief description of the character of business conducted in Rhode Island <b>Religious</b>			
5. Principal office address <b>500 Metacom Avenue</b>		City <b>Warren</b>		State <b>RI</b>	Zip <b>02885-2808</b>
6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name <b>Most Reverend Thomas J. Tobin</b>			Vice-President Name <b>Most Reverend Robert C. Evans</b>		
Street Address <b>One Cathedral Square</b>			Street Address <b>One Cathedral Square</b>		
City <b>Providence</b>	State <b>RI</b>	Zip <b>02903-3695</b>	City <b>Providence</b>	State <b>RI</b>	Zip <b>02903-3695</b>
Secretary Name <b>Rev. John E. Abreu</b>			Treasurer Name <b>Rev. John E. Abreu</b>		
Street Address <b>500 Metacom Avenue</b>			Street Address <b>500 Metacom Avenue</b>		
City <b>Warren</b>	State <b>RI</b>	Zip <b>02885-2808</b>	City <b>Warren</b>	State <b>RI</b>	Zip <b>02885-2808</b>
7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS <u>MUST</u> LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name <b>Alfred Aparicio</b>			Director Name <b>Manuel Rodrigues</b>		
Street Address <b>169 Fatima Drive</b>			Street Address <b>112 Anthony Street</b>		
City <b>Bristol</b>	State <b>RI</b>	Zip <b>02809</b>	City <b>Seekonk</b>	State <b>MA</b>	Zip <b>02771</b>
Director Name <b>Maria Silveira</b>			Director Name		
Street Address <b>84 Sowams Road</b>			Street Address		
City <b>Barrington</b>	State <b>RI</b>	Zip <b>02806</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, duly Authorized Representative, Receiver or Trustee

**FILED**

File Date \_\_\_\_\_

**JUN 12 2014**

Check No \_\_\_\_\_

By: \_\_\_\_\_

**BY 21830**

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. John E. Abreu*  
Signature of Officer or Authorized Representative

**06/10/2014**

Date

**FOR SECRETARY OF STATE USE ONLY**

**Rev. John E. Abreu**

Print or Type Name of Officer or Authorized Representative