

## 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 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.

<u> </u>			_					
1. Entity ID No.	2. Exact nai	2. Exact name of the Corporation						
27390	All Saint	All Saints Academy						
3. State of Incorporation	1	Brief description of the character of business conducted in Rhode Island     Religious, charitable and educational activities.						
Rhode Island	Religiou							
5. Principal office address One Cathedral Square			City Providence	State RI	Zip 02903			
6. LIST <u>ALL</u> OFFICERS (N	AMES AND ADDE	RESSES) ("X" BOX FO	OR ATTACHMENT)					
President Name			Vice-President Name					
Most Reverend Thomas J. Tobin			Rev. Msgr. Albert A. Kenney					
Street Address			Street Address					
One Cathedral Squar	е		One Cathedral Square		Γ_			
City	State	Zip	City	State	Zip			
Providence	RI	02903	Providence	RI	02903			
	ecretary Name Rev. Timothy D. Reilly		Treasurer Name Most Reverend Thomas J. Tobin					
Street Address One Cathedral Square		Street Address One Cathedral Square						
City	State	Zip	City	State	Zip			
Providence	RI	02903	Providence	RI	02903			
7. LIST <u>ALL</u> DIRECTORS ( ("X" BOX FOR ATTACHI		DRESSES). RHODE IS	LAND CORPORATIONS MUST I	IST NO LESS THAN	THREE (3) DIRECTORS			
Director Name			Director Name					
Most Reverend Thomas J. Tobin			Rev. Msgr. Albert A. Kenney					
Street Address			Street Address					
One Cathedral Squar	e e		One Cathedral Squa					
City	State	Zip	City	State	Zip			
Providence	RI	02903	Providence	RI	02903			
Director Name			Director Name					
Rev. Timothy D. Reill			Daniel J. Ferris					
Street Address			Street Address					
One Cathedral Squar	<del></del>		One Cathedral Squa		T			
City	State	Zip	City	State	Zip			
Providence	RI	02903	Providence	RI	02903			
8. REGISTERED AGENT IN								
			ary of State. Changes require fill					
This report must	be signed by either	r the President, Vice-P	President, Secretary, Assistant Secr	etary, Treasurer, Rec	eiver or Trustee			

File DateFILED		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.		
By:	JUN 3 0 2014	Signature of Officer	Date	
	JUN 3 9 2017	Rev. Timothy D. Reilly		
FOR SECRETARY OF STATE USE ONLY	15264	Print or Type Name of Officer	···	
RA	7-2007	- Secretary		
Form No. 631 Revised: 05/2012		Title of Officer		

## **ADDITIONAL OFFICER:**

**Assistant Treasurer** 

Dr. John Finnegan One Cathedral Square Providence, RI 02903

## **ADDITIONAL DIRECTOR:**

Dr. John Finnegan One Cathedral Square Providence, RI 02903

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**FILED** 

JUN 3 0 2014

BY 27390