



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 **2015**

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.

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|--|--------------------|---|---|----------------------|---------------------|
| 1. Entity ID No. 28274 | | 2. Exact name of the Corporation MARY, MOTHER OF MANKIND CHURCH CORPORATION | | | |
| 3. State of Incorporation RHODE ISLAND | | 4. Brief description of the character of business conducted in Rhode Island ROMAN CATHOLIC CHURCH | | | |
| 5. Principal office address 25 FOURTH STREET | | City NORTH PROVIDENCE | State RI | Zip 02911 | |
| 6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> | | | | | |
| President Name THE MOST REVEREND THOMAS J. TOBIN | | | Vice-President Name THE MOST REVEREND ROBERT C. EVANS | | |
| 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 JOSEPH A. PESCATELLO | | | Treasurer Name REVEREND JOSEPH A. PESCATELLO | | |
| Street Address 25 FOURTH STREET | | | Street Address 25 FOURTH STREET | | |
| City NORTH PROVIDENCE | State RI | Zip 02911 | City NORTH PROVIDENCE | State RI | Zip 02911 |
| 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 REVEREND JOSEPH A. PESCATELLO | | | Director Name MR. VALENTINO LOMBARDI | | |
| Street Address 25 FOURTH STREET | | | Street Address 11 STEPHANIE DRIVE | | |
| City NORTH PROVIDENCE | State RI | Zip 02911 | City NORTH PROVIDENCE | State RI | Zip 02904 |
| Director Name MRS. NANCY RICCITELLI | | | Director Name NONE | | |
| Street Address 39 JACKSONIA DRIVE | | | Street Address NONE | | |
| City NORTH PROVIDENCE | State RI | Zip 02911 | City NONE | State NONE | Zip NONE |
| 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

MAY 20 2015

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.

File Date _____

Check No _____

By: _____

BY 18187

Joseph A. Pescatello
 Signature of Officer or Authorized Representative

5/15/2015

Date

(REV.) JOSEPH A. PESCATELLO

Print or Type Name of Officer or Authorized Representative

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