STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Matthew A. Brown, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401.222.3040

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003

Filing Period: June 1 - June 30 • Filing Fee: $20.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 38200

2. Name of Corporation Church of the Sacred Heart

3. State of Incorporation RHODE ISLAND

4. Corporate address in Rhode Island - Street Address | *City* | *Zip*

*5. **Foreign corporation.** Enter principal office address* | *City* | *State* | *Zip*

6. Brief Description of the character of the affairs which are actually conducted in Rhode Island.
RELIGIOUS

7. NAMES AND ADDRESSES OF THE OFFICERS *("X" BOX FOR ATTACHMENT)* ☐ **FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name MOST REV. ROBERT MULVEE
Street Address ONE CATHEDRAL SQUARE
City PROVIDENCE *State* RI *Zip* 02903

Vice President Name REV. MSGR. WILLIAM VARSANYI
Street Address ONE CATHEDRAL SQUARE
City PROVIDENCE *State* RI *Zip* 02903

Secretary Name REV. PETER DI TULLIO, S.C.
Street Address 118 TAUNTON AVE
City EAST PROVIDENCE *State* RI *Zip* 02914

Treasurer Name REV. PETER DI TULLIO, S.C.
Street Address 118 TAUNTON AVE
City EAST PROVIDENCE *State* RI *Zip* 02914

8. NAMES AND ADDRESSES OF THE DIRECTORS *("X" BOX FOR ATTACHMENT)* ☐ **FILL IN THE SPACES BEFORE USING ATTACHMENTS**
THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23

Director Name REV. PETER DI TULLIO, S.C.
Street Address 118 TAUNTON AVE
City EAST PROVIDENCE *State* RI *Zip* 02914

Director Name DONALD BROTHERS
Street Address 27 ROSEMERE DRIVE
City EAST PROVIDENCE *State* RI *Zip* 02914

Director Name THOMAS CLUPNY
Street Address 30 BOURNE AVE
City RUMFORD *State* RI *Zip* 02916

Director Name
Street Address
City *State* *Zip*

9. REGISTERED AGENT IN RHODE ISLAND - *DO NOT ALTER* - Changes require filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78

Agent Name REV. PETER DITULLIO, SC
Address 118 TAUNTON AVENUE
City EAST PROVIDENCE *Zip* 02914

*This report must be **signed in ink** by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee*

[redacted] * 3 8 2 0 0 *

File Date 6-13-03
Check No. 2742
By [redacted]
FOR SECRETARY OF STATE USE ONLY

[redacted]

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.

Signature of Officer [redacted] *Date* 6-11-03
Print or Type Name of Officer FR. PETER DI TULLIO, S.C.
Title of Officer PASTOR

Form 631 Rev. 6/02