

## State of Rhode Island and Providence Plantations Office of the Secretary of State

Fee: \$20.00

Division Of Business Services 148 W. River Street Providence RI 02904-2615 (401) 222-3040

## Non-Profit Corporation Annual Report

Filing Period: June 1 - June 30

In accordance with R.I.G.L. 7-6-94, each corporation failing or refusing to file its annual report within the time prescribed by law (R.I.G.L. 7-6-91) is subject to a penalty fee of \$25.00.

**ANNUAL REPORT YEAR: 2016** 

1. Corporate ID No. 000798732

2. Name of Corporation Saint Therese Old Catholic Church

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: <u>1500 MAIN STREET</u>

City or Town: WEST WARWICK State: RI Zip: 02893 Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street:

City or Town: State: Zip: Country:

6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island

## TO OPERATE AS A HOUSE OF WORSHIP

## 7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete

THE NUMBER OF DIRECTORS OF A DOMESTIC(RHODE ISLAND)CORPORATION SHALL NOT BE LESS THAN THREE(3). R.I.G.L. 7-6-23

Title	Individual Name	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
TREASURER	CHARLES KENNETH DWYER	432 ROGER WILLIAMS AVE EAST PROVIDENCE, RI 02916 USA
DIRECTOR	DAVID M MARTINS	1500 MAIN STREET WEST WARWICK, RI 02893 USA
DIRECTOR	RICO CONFORTI	617 MONTGOMERY STREET

		FALL RIVER, MA 02720 USA
DIRECTOR	DARLENE ALLEN	12 EXETER STREET PROVIDENCE, RI 02906 USA
DIRECTOR	CHARLES DWYER	432 ROGER WILLIAMS AVENUE EAST PROVIDENCE, RI 02916 USA

8. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78

RICHARD L. COLLIER 110 LAWN AVENUE, #3 PAWTUCKET, RI 02860

9. This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver, or Trustee.

Signed this 20 Day of June, 2016 at 9:48:02 PM by the authorized person. This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-6.

By <u>CHARLES DWYER</u> Signature of Authorized Person

Form No. 631 Revised 09/07

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