



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. 000129791

2. Name of Corporation Holy Cross Catholic Church, Inc.

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 15 NORTH BEND STREET

City or Town: PAWTUCKET

State: RI Zip: 02860 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

A CHURCH

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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 First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	BISHOP RAYMOND LALIBERTE	15 NORTH BEND STREET PAWTUCKET, RI 02860 USA
TREASURER	DIANE LALIBERTE	15 NORTH BEND STREET PAWTUCKET, RI 02860 USA
SECRETARY	SHARON LALIBERTE	13 NORTH BEND STREET

		PAWTUCKET, RI 02860 USA
DIRECTOR	PAUL ALLISON	869 BURT STREET TAUNTON, MA 02780 USA
DIRECTOR	MADLINE SIMMONS	48 SPRING STREET REHOBOTH, MA 02769 USA
DIRECTOR	MARY CALLAGHAN	50 LOCUST STREET SWANSEA, MA 02777 USA
DIRECTOR	MICHELLE HOLGATE	38 MARTIN STREET REHOBOTH, MA 02769 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**

REV. RAYMOND E. LALIBERTE 15 NORTH BEND STREET 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 28 Day of July, 2016 at 9:47:27 AM 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 BISHOP RAYMOND LALIBERTE
Signature of Authorized Person

Form No. 631
Revised 09/07