



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

Annual Report for the year: 2017

Non-Profit Corporation

→ Filing period: June 1 - June 30

→ Filing Fee: \$20.00

→ Penalty: Additional \$25.00 fee if form is not filed by July 30.

1. Entity ID Number 30896		2. Exact name of the Corporation S.S. Peter and Paul's Church, Phoenixville Rhode Island			
3. State of Incorporation RI		5. Brief description of the character of business conducted in Rhode Island Non-Profit Roman Catholic Church in the Diocese of Providence			
4. NAICS Code 813110					
6. Principal Office Address 48 Highland St			City West Warwick	State RI	Zip 02893
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐					
President Name Most Rev. Thomas J. Tobin			Vice-President Name Most Rev. 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 Rev. Robert J. Giardina			Treasurer Name Rev. Robert J. Giardina		
Street Address 48 Highland St			Street Address 48 Highland St		
City West Warwick	State RI	Zip 02893	City West Warwick	State RI	Zip 02893
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment ☐					
Director Name Rev. Robert J. Giardina			Director Name Robert Pare		
Street Address 48 Highland St			Street Address 49 Hornbeam Rd		
City West Warwick	State RI	Zip 02893	City Coventry	State RI	Zip 02893
Director Name Jean Brousseau			Director Name		
Street Address 12 Harmony St			Street Address		
City West Warwick	State RI	Zip 02893	City	State	Zip
9. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641.					
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.					
This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.					
Name of Officer/Authorized Representative Rev. Robert J. Giardina				Date June 1, 2017	
Signature of Officer/Authorized Representative <i>Rev Robert J. Giardina</i>					

MAIL TO:
 Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040
 Website: www.sos.ri.gov

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JUN 05 2017

BY *9504*

FORM 631 - Revised: 05/2017