



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 30240		2. Exact name of the Corporation Saint Luke's Church Corporation			
3. State of Incorporation Rhode Island		5. Brief description of the character of business conducted in Rhode Island Religious Educational			
4. NAICS Code 813110 Religious Organization					
6. Principal Office Address 108 Washington Road			City Barrington	State RI	Zip 02806
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐					
President Name Most Reverend Thomas J. Tobin			Vice-President Name Most Reverend Robert C. Evans		
Street Address One Cathedral Square			Street Address One Cathedral Square		
City Barrington	State RI	Zip 02903	City Barrington	State RI	Zip 02903
Secretary Name Raymond Simone			Treasurer Name Reverend Robert F. Hawkins		
Street Address 6 Briarfield Road			Street Address 108 Washington Road		
City Barrington	State RI	Zip 02806	City Barrington	State RI	Zip 02806
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment ☐					
Director Name Reverend Robert R. Hawkins			Director Name David Loftus		
Street Address 108 Washington Road			Street Address 1580 Wampanoag Trail, #20		
City Barrington	State RI	Zip 02806	City Barrington	State RI	Zip 02806
Director Name Raymond Simone			Director Name		
Street Address 6 Briarfield Road			Street Address		
City Barrington	State RI	Zip 02806	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.					
<i>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.</i>					
Name of Officer/Authorized Representative Reverend Robert F. Hawkins				Date June 16, 2017	
Signature of Officer/Authorized Representative <i>Reverend Robert F. Hawkins</i>					

FILED

JUN 23 2017

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