RI SOS Filing Number: 201746778680 Date: 6/26/2017 4:00:00 PM

and the same
A STATE

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	2. Exact name of the Corporation				
30323	St. Martin's Parish				
3. State of Incorporation	5. Brief description of the character of business conducted in Rhode Island				
RI	Religious orga	anization			
4. NAICS Code	1				
813110 - Religious Organizatio					
6. Principal Office Address			City	State	Zip
50 Orchard Avenue			Providence	RI	02906
7. List ALL officers (names and add	dresses)	·	Check the	box to indicate a	n attachment
President Name Laura Bartsch			Vice-President Name John Bracken		
Street Address 284 Wayland Avenue			Street Address 2 Colley Court		
City Providence	State RI	^{Zip} 02906	City Barrington	State RI	Zip 02806
Secretary Name Jennifer Potter			Treasurer Name Michael DiSandro		
Street Address 570 Central Street		Street Address 25 Kenton Avenue			
^{City} Mapleville	State RI	^{Zip} 02839	City Rumford	State RI	^{Zip} 02916
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment					
Director Name Laura Bartsch			Director Name John Bracken		
Street Address 284 Wayland Avenue			Street Address 2 Colley Court		
City Providence	State RI	^{Zip} 02906	City Barrington	State RI	^{Zip} 02806
Director Name Jennifer Potter			Director Name Michael DiSandro		
Street Address 579 Central Street			Street Address 25 Kenton Avenue		
City Mapleville	State RI	^{Zip} 02839	City Rumford	State RI	^{Zip} 02916
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 Date					
Carol Anne Bennett				6-22-2017	
Signature of Officer/Authorized Representative					
Carol ane Bennett SIGN DOCUMENT HERE					

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov JUN 2 6 2017 0



St. Martin's Parish, 50 Orchard Avenue, Providence, RI 02906 Non-profit Corporation Annual Report 2017

ID# 30323

Item 7 – continuation – names and addresses of directors:

D' .	D	
Directors:	Peter Lofgren	119 Elton Street, Providence, RI 02906
	Katherine Chute	50 Park Row West #313, Providence, RI 02903
	Waylan Tucker	201 Wentworth Avenue, Edgewood, RI 02905
	Peter Dennehy	36 Hanson Road, Barrington, RI 02806
	Arline Walker	112 Sutton Avenue, East Providence, RI 02914
	Susan Allen	44 Oriole Avenue, Providence, RI 02906
	Mary Hollinshead	122 Martin Street, Rehoboth, MA 02769
	Helen Anthony	654 Angell Street, Providence, RI 02906
	Karen Ng	56 Belair Avenue, Providence, RI 02906