



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 29173		2. Exact name of the Corporation The Church of St. John the Baptist Pawt. RI			
3. State of Incorporation Rhode Island		5. Brief description of the character of business conducted in Rhode Island			
4. NAICS Code 813110		Roman Catholic Church			
6. Principal Office Address 69 Quincy Ave		City Pawtucket	State RI	Zip 02860	
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Thomas J. Tobin Bishop of Providence		Vice-President Name Robert C. Evans Auxiliary Bishop of Pawtucket			
Street Address One cathedral square		Street Address One cathedral square			
City Providence	State RI	Zip 02903	City Providence	State RI	Zip 02903
Secretary Name		Treasurer Name Rev. Brian Sistare			
Street Address		Street Address 69 Quincy Ave			
City	State	Zip	City Pawtucket	State RI	Zip 02860
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment <input type="checkbox"/>					
Director Name Rev. Brian Sistare		Director Name Mr. Gilbert Breaugh			
Street Address 69 Quincy Ave		Street Address 79 Capital St.			
City Pawtucket	State RI	Zip 02860	City Pawtucket	State RI	Zip 02860
Director Name Mr. Richard Mailhot		Director Name			
Street Address 15 Nancy Street		Street Address			
City Pawtucket	State RI	Zip 02860	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 Rev. Brian M. Sistare				Date July 5, 2017	
Signature of Officer/Authorized Representative <i>Rev. Brian M. Sistare</i>				FILED	

MAIL TO:
Division of Business Services
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Phone: (401) 222-3040
Website: www.sos.ri.gov

JUL 12 2017
BY COO J. S. L