RI SOS Filing Number: 201867729800 Date: 5/29/2018 4:00:00 PM

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual	Report for	or the	year:
Non-Pro	ofit Corp	oratio	n

2018

→ Filing period: June 1 - June 30

→ Filing Fee: \$20.00

Website: www.sos.ri.gov

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

1. Entity ID Number	2. Exact name of the Corporation						
28987	Church	Church of the Holy Name of Jesus at Providence, RI					
3. State of Incorporation	Brief description of the character of business conducted in Rhode Island						
RI	Roman Catholi	Roman Catholic Church					
4. NAICS Code							
813110 - Religious Organiza ▼							
6. Principal Office Address		···	City	State	Zip		
99 Camp St.			Providence	RI	02906		
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				
Cily Providence	State RI	^{Zıp} 02903	City Providence	Slate RI	Z ₁ p 02903		
Secretary Name Mark Berardo			Treasurer Name Rev. Josep	Treasurer Name Rev. Joseph D. Santos, Jr.			
Street Address 131 Woody Hill Road			Street Address 99 Camp St				
^{City} Bradford	Slate RI	Zip 02808	City Providence	State RI	Zip 02903		
8. List ALL directors (names and a	ddresses). RI Corp	porations MUST	list at least THREE directors.	Check the box to ind	cate an attachment		
Director Name Most Rev. Thomas J. Tobin			Director Name Most Rev. Robert C. Evans				
Street Address One Cathedral Square			Street Address One Cathedral Square				
City Providence	State RI	Z _{IP} 02903	City Providence	State RI	Zip 02903		
Director Name Rev. Joseph Santos			Director Name Mark Berardo				
Street Address 99 Camp St.			Street Address 131 Woody Hill Road				
City Providence	State RI	^{Zıp} 02906	City Bradford	State RI	Zip 02808		
9. Registered Agent in Rhode Islan	id. This information	is currently of reco	ord in the Department of State. Cha	inges require filing Form (341.		
Under penalty of perjury, I decla statements, and that all stateme				accompanying sched	lules and		
This report must be signed by either the Pro-	sident, Vice-President,	Secretary, Assistant	Secretary, Treasurer, duly Authorized Ri	epresentative, Receiver or Tri	ustee		
Name of Officer/Authorized Representative Date							
Rev. Joseph D. Santos, Jr.					1 64 20/8		
Signature of Officer/Authorized Representative Change Comment Here Cha							
MAIL TO:							
Division of Business Services MAY 2 9 2018 MAY 2 9 2018							
Phone: (401) 222-3040	rsianu V29U4-2015		JACA				

FORM 631 - Revised: 11/2017

Entity ID # 28987

Church of the Holy Name of Jesus, Providence, RI

Director:

Nkolika E. Onye

903 Providence Place #108

Providence, RI 02903