



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

FILED

JUN 03 2019

BY IS
LOK

Annual Report for the year: **2019**

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 000029076		2. Exact name of the Corporation Church of Our Lady of Good Counsel Warwick, Rhode I			
3. State of Incorporation RI		5. Brief description of the character of business conducted in Rhode Island Roman Catholic Church			
4. NAICS Code 813110 - Religious Organiza					
6. Principal Office Address 62 Pleasant St		City West Warwick	State RI	Zip 02893	
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Most Rev. Thomas J. Tobin		Vice-President Name Rev. Msgr. Albert A. Kenney			
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. Paul R. Lemoi		Treasurer Name Rev. Paul R. Lemoi			
Street Address 62 Pleasant St.		Street Address 62 Pleasant 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 <input type="checkbox"/>					
Director Name Most Rev. Thomas J. Tobin		Director Name Rev. Msgr. Albert A. Kenney			
Street Address One Cathedral Square		Street Address One Cathedral Square			
City Providence	State RI	Zip 02903	City Providence	State RI	Zip 02903
Director Name Rev. Paul R. Lemoi		Director Name Dr. Alfred Arcand			
Street Address 62 Pleasant St.		Street Address 24 Mumford St.			
City West Warwick	State RI	Zip 02893	City Coventry	State RI	Zip 02816
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.					
<small>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee</small>					
Name of Officer/Authorized Representative Rev. Paul R. Lemoi				Date 5/31/2019	
Signature of Officer/Authorized Representative <i>Rev. Paul R. Lemoi</i>					

MAIL TO:
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 Website: www.sos.ri.gov