

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: Non-Profit Corporation

2019

FILED STAMP

JUN 0 5 2019)

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\rightarrow	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 o	f the Corporation							
29148	CHURCH OF THE SACRED HEART								
3. State of Incorporation	5. Brief description of the character of business conducted in Rhode Island								
Rhode Island	Church affairs, religious								
4. NAICS Code	1								
813110 - Religious Organiza									
6. Principal Office Address			City	State	Zip				
820 PROVIDENCE STREET			WEST WARWICK	RI	02893				
7. List ALL officers (names and add	dresses)		Ch	eck the box to indicat	e an attachment				
President Name MOST REV. THO	MAS J. TOBIN		Vice-President Name REV. MSGR. ALBERT A. KENNEY						
Street Address ONE CATHEDRA	L SQUARE		Street Address ONE CATHEDRAL SQUARE						
City PROVIDENCE	State RI	^{Zip} 02903	City PROVIDENCE	State RI	Zip 02903				
Secretary Name REV. RICHARD	A. BUCCI	•	Treasurer Name REV. RICHARD A. BUCCI						
Street Address 820 PROVIDENCE	E STREET		Street Address 820 PROVIDENCE STREET						
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									
Director Name MOST REV. THON	MAS J. TOBIN		Director Name REV. MSGR. ALBERT A. KENNEY						
Street Address ONE CATHEDRA	L SQUARE		Street Address ONE CATHEDRAL SQUARE						
City PROVIDENCE	State RI	Zip 02893	City PROVIDENCE	State RI	^{Zip} 02893				
Director Name REV. RICHARD A	A. BUCCI	.	Director Name MARIANNA P. MARSOCCI						
Street Address 820 PROVIDENCI	E STREET		Street Address 42 PONTIAC STREET						
City WEST WARWICK	State RI	^{Zip} 02893	City WARWICK	State RI	^{Zip} 02886				
9. Registered Agent in Rhode Islan	id. This information i	s currently of record	in the Department of State. Changes re	equire filing Form 641					
Under penalty of perjury, I declar statements, and that all stateme			this report, including any accon correct.	npanying schedule	es and				
			cretary, Treasurer, duly Authorized Represent	ative, Receiver or Truste	·e.				
Name of Officer/Authorized Repres	sentative			Date					
REV. RICHARD A) BUCCI				VI-1-19					
Signature of Officer/Authorized Rep	resentative	SIGN DSC	PSI X-1FCC						

MAIL TO:/

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri gov

LEGAL TITLE OF CORPORATION

CHURCH OF THE SACRED HEART

ADDITIONAL DIRECTOR:

Mr. James J. Prata Lay Trustce

> 1047 Main Avenue Warwick, RI 02886