



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

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

FILED

JUN 06 2019

RV

000716

1 Entity ID Number 0030187		2 Exact name of the Corporation St. Joseph Church of Providence		
3 State of Incorporation Rhode Island		5 Brief description of the character of business conducted in Rhode Island Roman Catholic Services Place of Worship		
4 NAICS Code 813110 - Religious Organiz				
6 Principal Office Address 92 Hope Street		City Providence	State RI	Zip 02906
7 List ALL officers (names and addresses) Check the box to indicate an attachment ☐				
President Name Most Rev. Thomas J. Tobin, D.D.		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
Secretary Name Rev. Edward A. Sousa, Jr.		Treasurer Name Rev. Edward A. Sousa, Jr.		
Street Address 92 Hope Street		Street Address 92 Hope Street		
City Providence	State RI	Zip 02906	City Providence	State RI
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. Thomas J. Tobin, D.D.		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
Director Name Charles Wharton		Director Name Suzanne Hall		
Street Address 4 Jenkes Street		Street Address 23 Halsey Street		
City Providence	State RI	Zip 02906	City Providence	State RI
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. Edward A. Sousa, Jr.				Date June 1, 2019
Signature of Officer/Authorized Representative <i>Rev. Edward A. Sousa, Jr.</i>				

MAIL TO:

Division of Business Services

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