RI SOS Filing Number: 201904736240 Date: 7/15/2019 4:00:00 PM



State of Rhode Island and Providence Plantations

Départment 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 JUL 15 2019 D 9652

1. Entity ID Number 000029202		2. Exact name of the Corporation Church of St. Mary of the Bay				
3. State of Incorporation	5. Brief desc	5. Brief description of the character of business conducted in Rhode Island				
Rhode Island	Roman Ca	Roman Catholic Church				
4. NAICS Code						
813110 - Religious Organ]					
6. Principal Office Address			City	State	Zip	
645 Main Street			Warren	RI	02885	
7. List ALL officers (names and	addresses)			Check the box to indic	cate an attachment	
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. William D. Grant		Treasurer Name Rev. William D. Grant				
Street Address 645 Main Street		Street Address 645 Main Street				
City Warren	State RI	Zip 02885	City Warren	State RI	^{Zip} 02885	
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		Director Name Rev. Msgr. Albert A. Kenney				
Street Address One Cathedral Square			Street Address One Cathedral Square			
City Providence	State RI	Zip 0290 3	City Providence	State RI	^{Zip} 02903	
Director Name Rev. William D. Grant			Director Name William Estrella			
Street Address 645 Main Street			Street Address 58 Baker Street			
City Warren	State RI	Zip 02885	City Warren	State RI	^{Zip} 02885	
9. Registered Agent in Rhode I	sland. This informat	tion is currently of reco	ord in the Department of State. Cha	inges require filing Form 6	41.	
Under penalty of perjury, I de statements, and that all state				accompanying sched	ules and	
This report must be signed by either the				epresentative, Receiver or Tru	islee.	
Name of Officer/Authorized Representative Rev. William D. Grant				Date 7 - /	0-19	
Signature of Officer/Authorized			CUMIENT HERE			

MAIL TO:

Division of Business Services

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

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

Entity # 00029202 Church of St. Mary of the Bay

Director Name Theresa	DeRiso			
Street Address 49 Peck Avenue				
City Bristol	State RI	^{Zip} 02809		
Director Name	•			
Street Address				
City	State	Zlp		
<u></u>				