

State of Rhode Island and Providence Plantations

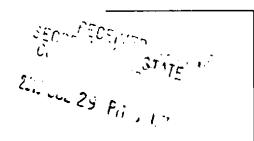
Department of State - Business Services Division

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.



| 1. Entity ID Number 30862 | | f the Corporation | nurch Providenc | e Rhode Islar | nd |
|--|--|----------------------|---|------------------------------|-----------------------------|
| 3. State of Incorporation RHODE ISLAND | Brief description of the character of business conducted in Rhode Island Religious, charitable and educational activities. | | | | |
| 4. NAICS Code | | | | | |
| 813110 - Religious Organiza | | | | | |
| 6. Principal Office Address | <u> </u> | · - | City | State | Zip |
| One Cathedral Square | | | Providence | RI | 02903 |
| 7. List ALL officers (names and add | lresses) | | | Check the box to indicat | e an altachment |
| President Name Most Reverend 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. Timothy D. Reilly | | | Treasurer Name Rev. Timothy D. Reilly | | |
| Street Address One Cathedral Square | | | Street Address One Cathedral Square | | |
| ^{City} Providence | State RI | ^{Zip} 02903 | City Providence | State RI | ^{Zip} 02903 |
| 8. List ALL directors (names and a | ddresses). RI Con | porations MUST | list at least THREE directors. | Check the box to indicat | e an attachment |
| Director Name Most Reverend 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. Timothy D. Reilly | | | Director Name Velia Lisi | | |
| Street Address One Cathedral Square | | | Street Address One Cathedral Square | | |
| City Providence | State RI | Zip 02903 | City Providence | State RI | ^{Zip} 02903 |
| 9. Registered Agent in Rhode Islan | nd. This information | is currently of reco | rd in the Department of State. Char | nges require filing Form 641 | |
| Under penalty of perjury, I decla statements, and that all stateme | | | | accompanying schedul | es and |
| This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee | | | | | |
| Name of Officer/Authorized Representative | | | | Date | 1.0 |
| Rev. Timothy D. Reilly, Secretary | | | | | |
| Signature of Officer Authorized Representative, Signification of FILED | | | | | |

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov JUL 29 2019

BY & USULL

ADDITIONAL DIRECTOR:

Paula Mollo One Cathedral Square Providence, RI 02903