



**State of Rhode Island  
Office of the Secretary of State**

**Fee: \$20.00**

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

**Non-Profit Corporation  
Annual Report**

*Filing Period: June 1 - June 30*

*In accordance with R.I.G.L. 7-6-94, each corporation failing or refusing to file its annual report within the time prescribed by law (R.I.G.L. 7-6-91) is subject to a penalty fee of \$25.00.*

**ANNUAL REPORT YEAR:** 2021

**1. Corporate ID No.** 000030825

**2. Name of Corporation** ST. PETER'S and ST. ANDREWS CHURCH

**3. State of Incorporation**

State: RI

**ARTICLE III**

Using the dropdown labeled NAICS Code below, select the classification title that describes the primary type of activity in which your entity engages. The box to the right of the dropdown will populate a NAICS Code based on the chosen selection. If the NAICS Code is known, enter it into the box on the right. For further assistance with selecting a classification [click here](#).

NAICS Code



813110

**4. Principal Office Address**

No. and Street: 25 POMONA AVENUE

City or Town: PROVIDENCE

State: RI

Zip: 02908

Country: USA

**5. Foreign Corporation. Enter Principal Office Address**

No. and Street:

City or Town: State: Zip: Country:

**5. Brief Description of the Character of the Affairs Conducted in Rhode Island**

RELIGIOUS SERVICES IN THE ANGLICAN/EPISCOPALIAN TRADITION

**6. Names and Addresses of the Officers and Directors:**

**All Directors and Officers must be listed individually. The number of DIRECTORS of a Rhode Island Corporation shall not be less than 3.**

| <b>Title</b> | <b>Individual Name</b><br>First, Middle, Last, Suffix | <b>Address</b><br>Address, City or Town, State, Zip Code, Country |
|--------------|-------------------------------------------------------|-------------------------------------------------------------------|
| TREASURER    | RUTH RICCITELLI                                       | 26 COUNTRYSIDE DRIVE<br>NORTH PROVIDENCE, RI 02904 US             |
| BOARD MEMBER | DOROTHY LARIVIERE                                     | 433 WOONASQUATUCKET AVE<br>NORTH PROVIDENCE, RI 02911 USA         |
| SR. WARDEN   | RICHARD TODD GRISDALE                                 | P.O. BOX 2482<br>DUXBURY, MA 02331 US                             |
| CLERK        | CATHERINE M. CALISTRA                                 | 124 1ST AVENUE<br>CRANSTON, RI 02910 US                           |
| VICAR        | MARYALICE SULLIVAN                                    | 91 BELLA VISTA CIR.<br>GLOCESTER, RI 02814 USA                    |
| DIRECTOR     | MARYALICE SULLIVAN                                    | 91 BELLA VISTA CIR.<br>GLOCESTER, RI 02814 USA                    |
| DIRECTOR     | THOMAS J. CASSERLY                                    | 4 SMITHFIELD ROAD UNIT 22<br>NORTH PROVIDENCE, RI 02904 US        |
| DIRECTOR     | RICHARD TODD GRISDALE                                 | P.O. BOX 2482<br>DUXBURY, MA 02331 US                             |

**7. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER**  
**Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78**

FINANCE MANAGEMENT SERVICES, INC. 1260 VICTORY HIGHWAY, NORTH SMITHFIELD P.O. BOX 870 SLATERSVILLE , RI 02876

**8. This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver, or Trustee.**

**Signed this 17 Day of June, 2021 at 1:27:25 PM by the authorized person. This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-6.**

By CATHERINE M. CALISTRA  
Signature of Authorized Person

Form No. 631  
Revised 09/07