



Department of State - Business Services Division

Annual Report for the year: 2021
Non-Profit Corporation

- Filing period: June 1 - June 30
- Filing Fee: \$2000
- Penalty: Additional \$25.00 fee if form is not filed by July 30.

FILED
JUL 21 2021
 BY _____

1. Entity ID Number 690475		2. Exact name of the Corporation Saint John Paul II Parish, Pawtucket, Rhode Island			
3. State of Incorporation RI		5. Brief description of the character of business conducted in Rhode Island Roman Catholic Church			
4. NAICS Code 813110 - Religious Organization <input type="checkbox"/>					
6. Principal Office Address 755 Central Ave		City Pawtucket	State RI	Zip 02861	
7. List ALL officers (names and addresses) <input type="checkbox"/> Check the box to indicate 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. Stephen M. Battey		Treasurer Name Rev. Stephen M. Battey			
Street Address 755 Central Ave		Street Address 755 Central Ave			
City Pawtucket	State RI	Zip 02861	City Pawtucket	State RI	Zip 02861
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. <input type="checkbox"/> Check the box to indicate an attachment					
Director Name Rev. Msgr. Albert A. Kenney		Director Name Albert J. Ferland			
Street Address One Cathedral Square		Street Address 158 Greenville Ave			
City Providence	State RI	Zip 02903	City Pawtucket	State RI	Zip 02861
Director Name Lorraine Lussier		Director Name			
Street Address 27 Bowen St.		Street Address			
City Pawtucket	State RI	Zip 02861	City	State	Zip
9. The Registered Agent information of record with the RI Department of State is accurate. 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. Stephen M. Battey				Date 7/12/2021	
Signature of Officer/Authorized Representative <i>Rev. Stephen M. Battey</i>				FILED	

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