RI SOS Filing Number: 202331302460 Date: 3/16/2023 4:00:00 PM

State of Rhode Island

Department of State - Business Services Division

2023

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2023 MAR 16 A 11: 42

Annual Report for the year: 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	2. Exact name of the Corporation					
000112842	Mandamiento Nuevo Corporation					
3. State of Incorporation	5. Brief description of the character of business conducted in Rhode Island					
RI	Promoting, sponsoring, constructing, rehabilitating and renovating low and moderate income,					
4. NAICS Code	elderly and assisted living housing in the State of Rhode Island					
624120 - Services for Elderly and						
6. Principal Office Address			City	State	Zip	
One Cathedral Square c/o Diocese of Providence			Providence	RI	02903	
7. List ALL officers (names and addresses) Check the box to indicate an attachment						
President Name Reverend Monsignor Paul D. Theroux			Vice-President Name			
Street Address Holy Apostles Church, 800 Pippin Orchard Road			Street Address			
City Cranston	State RI	^{Zip} 02921	City	State	Zip	
Secretary Name John J. Barry III			Treasurer Name Michael F. Sabatino			
Street Address Diocease of Providence, One Cathedral Square			Street Address Diocease of Providence, One Cathedral Square			
City Providence	Siate RI	^{Zip} 02903	City Providence	State RI	Zip 02903	
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment						
Director Name Michael F. Sabatino			Director Name Reverend Monsignor Paul D. Theroux			
Street Address Diocease of Providence, One Cathedral Square			Street Address Holy Apostles Church, 800 Pippin Orchard Road			
City Providence	State RI	^{Zip} 02903	City Cranston	Slate RI	^{Z(p} 02921	
Director Name Reverend Dennis A. Reardon			Director Name John J. Barry III			
Street Address 124 Frigate Street			Street Address Diocese of Providence, One Cathedral Square			
City Jamestown	State RI	^{Zip} 02835	City Providence	State RI	^{Zip} 02903	
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.						
This report must be signed by either of e President, Vice-President, Secretary, Assistant Secretary, Treesurer, duly Authorized Representative, Receiver or Trusted.						
Name of Officer/Authorized Representative Michael F. Sabatino						
Signature of Officer/Authorizer Representative FILED						

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

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

FORM 631 - Revised: 08/2020