



State of Rhode Island

Department of State - Business Services Division

FILED

MAR 31 2023

BY

Annual Report for the year: 2023

Non-Profit Corporation

→ Filing period: February 1 - May 1

→ Filing Fee: \$20.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

1. Entity ID Number 025086		2. Exact name of the Corporation Church of Our Lady of Loreto	
3. State of Incorporation Rhode Island		5. Brief description of the character of business conducted in Rhode Island Roman Catholic Church	
4. NAICS Code 813110 - Religious Organization			
6. Principal Office Address 346 Waterman Avenue		City East Providence	State RI Zip 02914
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
President Name Most Reverend Thomas J. Tobin		Vice-President Name Reverend Msgr. Albert A Kenney	
Street Address One Cathedral Square		Street Address One Cathedral Square	
City Providence	State RI	Zip 02903	City Providence
Secretary Name Rev. Maria Julian Bernad Lourdu Samy		Treasurer Name Rev. Maria Julian Bernad Lourdu Samy	
Street Address 346 Waterman Avenue		Street Address 346 Waterman Avenue	
City East Providence	State RI	Zip 02914	City East Providence
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment <input type="checkbox"/>			
Director Name Most Reverend Thomas J. Tobin		Director Name Reverend Msgr. Albert A Kenney	
Street Address One Cathedral Square		Street Address One Cathedral Square	
City Providence	State RI	Zip 02903	City Providence
Director Name Rev. Maria Julian Bernad Lourdu Samy		Director Name Joseph E. DeAndrade	
Street Address 346 Waterman Avenue		Street Address 173 Waterman Avenue	
City East Providence	State RI	Zip 02914	City East Providence
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. Maria Julian Bernad Lourdu Samy			Date 3/8/2023
Signature of Officer/Authorized Representative 			

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

JD 029086

Addendum:

Legal Title of Corporation

Stephen J. Capineri

Additional Director

Lay Trustee

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BY

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[Signature]

11-11-2023