RI SOS Filing Number: 202335070040 Date: 5/1/2023 4:00:00 PM



State of Rhode Island

Department of State - Business Services Division

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.

FILED						
MAY 0 152023 X						

1. Entity ID Number 30392	2. Exact name of the Corporation St. Mary's Parish						
State of Incorporation RI	5. Brief description of the character of business conducted in Rhode Island Religious church						
4. NAICS Code 813110			•				
6. Principal Office Address		<u>-</u>	City	State	Zip		
81 Warren Ave	arren Ave			RI	02914		
7. List ALL officers (names and addresses) Check the box to indicate an attachment							
President Name			Vice-President Name				
Street Address			Street Address				
City	State	Zıp	City	State	Zıp		
Secretary Name Terri Lyn Capron			Treasurer Name				
Street Address 124 Vine St			Street Address				
City East Providence	State RI	^{Zip} 02914	Crty	State	Zıp		
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment							
Director Name Sharon Hicks			Director Name Leslie Willis				
Street Address 581 Lincoln St			Street Address 117 Hall St				
City Seekonk	State MA	^{Z_{ip}} 02271	City East Providence	State RI	^{Zip} 02914		
Director Name .	Cac	Director Name					
Street Address Unc St.			Street Address				
E Prov	State	Zir DSIL	City	State	Zıp		
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 the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee							
Name of Officer/Authorized Representative Date							
Terri Lyn Capron				4/28/2023			
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