



State of Rhode Island
Department of State - Business Services Division

FILED

MAY 03 2023
 BY: *[Signature]*

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 000031524		2. Exact name of the Corporation St. Philip's Church, Greenville, Rhode Island			
3. State of Incorporation Rhode Island		5. Brief description of the character of business conducted in Rhode Island Religious entity - charitable organization			
4. NAICS Code 813110					
6. Principal Office Address 622 Putnam Pike			City Greenville	State RI	Zip 02828
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
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. Michael J. McMahon			Treasurer Name Rev. Michael J. McMahon		
Street Address 622 Putnam Pike			Street Address 622 Putnam Pike		
City Greenville, RI	State RI	Zip 02828	City Greenville	State RI	Zip 02828
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment <input checked="" type="checkbox"/>					
Director Name MOST REV. THOMAS J. TOBIN			Director 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
Director Name Rev. Michael McMahon			Director Name ANTONIO FONSECA		
Street Address 622 Putnam Pike			Street Address 84 Austin Avenue		
City Greenville	State RI	Zip 02903	City Greenville	State RI	Zip 02828
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.					
<small>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.</small>					
Name of Officer/Authorized Representative Reverend Michael J. McMahon				Date April 25, 2023	
Signature of Officer/Authorized Representative <i>Rev. Michael J. McMahon</i>					

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

ID 31524

Saint Philip's Church, Greenville, Rhode Island

ADDITIONAL DIRECTOR:

Elizabeth Santucci
10 Appletown Road
Greenville, RI 02828

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[Signature]