



State of Rhode Island  
Department of State - Business Services Division

Annual Report for the year:  
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.

FEB 06 2024 STAMP

161702

1. Entity ID Number 30961		2. Exact name of the Corporation St. Mary's Church - Cranston 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			
6. Principal Office Address 20 Washington St.		City W. Warwick	State RI
		Zip 02893	
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>			
President Name Most Rev. Richard Henning		Vice-President Name Rev. Msgr. Albert A. Kenney	
Street Address One Cathedral Sq.		Street Address One Cathedral Sq.	
City Providence	State RI	City Providence	State RI
Zip 02903		Zip 02903	
Secretary Name Rev. Nicholas Fleming		Treasurer Name Rev. Nicholas Fleming	
Street Address 20 Washington St.		Street Address 20 Washington St.	
City West Warwick	State RI	City West Warwick	State RI
Zip 02893		Zip 02893	
8. List ALL directors (names and addresses). RI Corporations <b>MUST</b> list at least <b>THREE</b> directors. <span style="float: right;">Check the box to indicate an attachment <input checked="" type="checkbox"/></span>			
Director Name Rev. Nicholas Fleming		Director Name Most Rev. Richard Henning	
Street Address 20 Washington St.		Street Address One Cathedral Sq.	
City West Warwick	State RI	City Providence	State RI
Zip 02903		Zip 02903	
Director Name Rev. Msgr. Albert Kenney		Director Name Linda Osenkowski	
Street Address One Cathedral Sq.		Street Address 105 Pin Brook Ln	
City Providence	State RI	City Covington	State RI
Zip 02903		Zip 02816	
9. The Registered Agent information of record with the RI Department of State is accurate. Changes require filing Form 641.			
<b>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.</b>			
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 Rev. Nicholas Fleming			Date 2/3/24
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

Mary DePrete

129 Cowesett Ave.

West Warwick, RI 02893