



State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2024

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

APR 23 2024

BY

538
[Signature]

1. Entity ID Number 000030187		2. Exact name of the Corporation St. Joseph's Church Providence 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 92 Hope Street			City Providence	State RI	Zip 02906
7. List ALL officers (names and addresses). Check the box to indicate an attachment ☐					
President Name Most Rev. Richard G. Henning			Vice-President Name Rev. Msgr. Albert A. Kenney		
Street Address One Cathedral Square			Street Address One Cathedral Square		
City Providence	State RI	Zip 02906	City Providence	State RI	Zip 02906
Secretary Name Rev. Edward A. Sousa Jr.			Treasurer Name Rev. Edward A. Sousa Jr.		
Street Address 92 Hope Street			Street Address 92 Hope Street		
City Providence	State RI	Zip 02906	City Providence	State RI	Zip 02906
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment ☒					
Director Name Most Rev. Richard G. Henning			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. Edward A. Sousa Jr.			Director Name Charles Wharton		
Street Address 92 Hope Street			Street Address 4 Jenkes Street		
City Providence	State RI	Zip 02906	City Providence	State RI	Zip 02906
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 Rev. Edward A. Sousa Jr.					Date 3/8/2024
Signature of Officer/Authorized Representative Edward A. Sousa Jr. (Rev.)					

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

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Website: www.sos.ri.gov