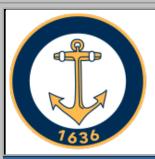
RI SOS Filing Number: 202572980960 Date: 5/13/2025 10:27:00 AM



State of Rhode Island Office of the Secretary of State

Fee: \$20.00

Division Of Business Services 148 W. River Street Providence RI 02904-2615 (401) 222-3040

Non-Profit Corporation Annual Report

Filing Period: February 1 - May 1

In accordance with R.I.G.L. 7-6-94, each corporation failing or refusing to file its annual report within the time prescribed by law (R.I.G.L. 7-6-91) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR - ENTER THE CURRENT YEAR **2025**: <u>2025</u>

- 1. Corporate ID No. 000014235
- 2. Name of Corporation THE McAULEY CORPORATION
- 3. State of Incorporation

State: RI

NAICS CODE

Using the dropdown labeled NAICS Code below, select the classification title that describes the primary type of activity in which your entity engages. The box to the right of the dropdown will populate a NAICS Code based on the chosen selection. If the NAICS Code is known, enter it into the box on the right. For further assistance with selecting a classification click here.

NAICS Code

<u>624190</u>

4. Principal Office Address

No. and Street: <u>622 ELMWOOD AVENUE</u>

PO BOX 73195

City or Town: PROVIDENCE State: RI Zip: 02907 Country: USA

5. Brief Description of the Character of the Affairs Conducted in Rhode Island

ADMINISTRATION AND DIRECTION OF WORKS OF MERCY OF THE SISTERS OF MERCY. THE CORPORATION IS ORGANIZED, AND SHALL BE OPERATED EXCLUSIVELY FOR RELIGIOUS AND CHARITABLE PURPOSES WITHIN THE MEANING OF SECTION 501(C) (3).

6. Names and Addresses of the Officers and Directors:

All Directors and Officers must be listed individually. The number of DIRECTORS of a Rhode Island Corporation shall not be less than 3.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	BARBARA HAYNES	622 ELMWOOD AVE., PO BOX 73195 PROVIDENCE, RI 02907 USA
TREASURER	BARBARA HART	1 NARROWS ROAD NARRAGANSETT, RI 02879 USA
SECRETARY	LYNN MALLONEY	20 ROBERT AVENUE WARWICK, RI 02818 USA
VICE PRESIDENT	SCOTT CAMIRAND	77 MEETING HOUSE LANE LITTLE COMPTON, RI 02837 USA
DIRECTOR	BARBARA HAYNES	622 ELMWOOD AVE PROVIDENCE , RI 02907 USA
DIRECTOR	JUDITH RAMETTA	36 VERMONT AVE. UNIT 1 WARWICK, RI 02888 USA
DIRECTOR	BARBARA HART	23 BROAD ST. WESTERLY, RI 02851 USA
DIRECTOR	SCOTT GRACE	1 OVERHEAD WAY WARWICK, RI 02888 USA
DIRECTOR	MEGHAN HOPKINS	ONE CITIZENS PLAZA, STE. 500 PROVIDENCE, RI 02903 USA
DIRECTOR	KELLY VILLANUEUA	440 LINCOLN ST. WORCESTER, MA 01653 USA
DIRECTOR	MISTY DELGADO	101 FRIENDSHIP ST. PROVIDENCE, RI 02903 USA
DIRECTOR	MAURA LEGARE	10 HILL DRIVE EAST GREENWICH, RI 02818 USA
DIRECTOR	SCOTT CAMIRAND	77 MEETING HOUSE LANE LITTLE COMPTON, RI 02837 USA
DIRECTOR	PAMELA ALARIE	1 BEACON CENTER WARWICK, RI 02886 USA
DIRECTOR	KIRSTEN DICHIAPPARI	9 ECHO FARM DR. BRISTOL, RI 02809 USA
DIRECTOR	JONATHAN BARRETT	50 MAIN STREET EAST GREENWICH, RI 02818 USA
DIRECTOR	JANET JOHNSON	2 BLUE ROCK LANE NORTH ATTLEBORO, MA 02760 USA
DIRECTOR	AMANDA GRATTAN	94 WISTERIA LANE COVENTRY, RI 02816 USA
DIRECTOR	LYNN MALLONEY	20 ROBERT AVENUE WARWICK, RI 02818 USA
DIRECTOR	VERONICA VEGA	85 W. PARK PLACE WOONSOCKET, RI 02895 USA

7. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78

NEAL J. MCNAMARA, ESQ. NIXON PEABODY LLP ONE CITIZENS PLAZA, SUITE 500 PROVIDENCE, RI 02903

8. This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver, or Trustee.

Signed this 13 Day of May, 2025 at 10:30:20 AM by the authorized person. This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-6.

By BARBARA HAYNES

Signature of Authorized Person

Form No. 631 Revised 09/07

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