

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street Providence, RI 02904-2615

401.222.3040

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2011

Filing Period: June 1 - June 30 • Filing Fee: \$20.00 * THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK

* 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

o a penalty fee of \$25.00.			_		
. Corporate ID No.	2. Name of Corporation				
29191	St. Augustine School Endowment Fund				
. State of Incorporation	4. Corporate address in I	lbode Island - Street Address		City	Zip
Rhode Island	20 Old Ro	oad		Providence	02908
5. Foreign corporation. Enter principal office address			City	State	Zip
				<u> </u>	
5. Brief Description of the character of	•	tually conducted in Rbode Isla	and		
Roman Catholi	c Church				
7. NAMES AND ADDRESSES	OF THE OFFICERS	S: ("X" BOX FOR ATTACH	MENT) TILL IN SPACES E	EFORE USING ATTAC	HMENTS
President Name	<i>i</i>	•	Vice President Name		
Most Rev. Thomas J. Tobin, D.D.			Most Rev. Robert C. Evans, D.D.		
Street Address			Street Address		
One Cathedral Square			One Cathedral Square		
City	State	Zip	City	State	Zip
<u>Providence</u>	R.I.	02903	Providence	R.I.	02903
Secretary Name			Treasurer Name		
Rev. Msgr. Barry R.L. Connerton			Rev. Msgr. Barry R.L. Connerton		
Street Address	•		Street Address		
20 Old Road			20 Old Road		
City	State	Zip	City	State	Zip
Providence	R.I.	02908	Providence	R.I.	02908
8. NAMES AND ADDRESSE	S OF THE DIRECTO	ORS: ("X" BOX FOR ATTA	<i>CHMENT)</i> FILL IN SPACES	BEFORE USING ATTA	ACHMENTS
THE NUMBER OF DIRECT	ORS OF A DOMEST	TIC (RHODE ISLAND)	CORPORATION SHALL NOT	BE LESS THAN THE	EE (3). R.I.G.L. 7-6-23
Director Name			Director Name		
George T. Rocchio			David E. Martinelli		
Street Address			Street Address		
29 Sherman Avenue			3 Fox Tale Drive		
City	State	Zip	City	State	Zip
N. Providence	R.I.	02911	Johnston	R.I.	02919
Director Name			Director Name		
Rev. Msgr.	Barry R.L.	Connerton			
Street Address			Street Address		
20 Old Road	1				
City	State	Zip	City	State	Zip
Providence	R.I.	02908	nges require filing of Form	 641 - R.L.G.L. 7-6-13	\ \
Agent Name			Address		
Address			City		
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FILED	Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all
File DateMAY 2.5 2011	statements contained begin are true and controct. In Part January 5 24/11 Signature of Officer Date
By:	Rev. Msgr. Barry R.L. Connerton Print or Type Name of Officer Secretary & Treasurer
FOR SECRETARY OF STATE USE ONLY	Title of Officer