



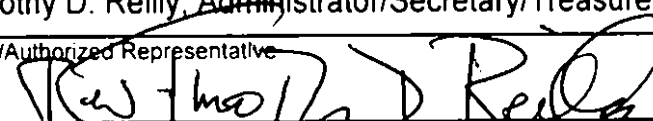
State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2023
 Non-Profit Corporation

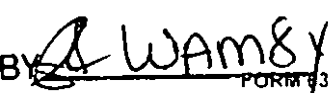
- Filing period: February 1 - May 1
- Filing Fee: \$20.00
- Penalty: Additional \$25.00 fee if form is not filed by May 31.

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 R.I. DEPT. OF STATE
 BUS SVCS DIV

2023 MAR 31 PM 12:42

1. Entity ID Number 00026456		2. Exact name of the Corporation Holy Angels Church Corporation			
3. State of Incorporation Rhode Island		5. Brief description of the character of business conducted in Rhode Island Church Affairs			
4. NAICS Code 813110 - Religious Organizations					
6. Principal Office Address 341 Maple Avenue			City Barrington	State RI	Zip 02806
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Most Reverend Thomas J. Tobin			Vice-President Name Reverend 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 Reverend Timothy D. Reilly			Treasurer Name Reverend Timothy D. Reilly		
Street Address 341 Maple Avenue			Street Address 341 Maple Avenue		
City Barrington	State RI	Zip 02806	City Barrington	State RI	Zip 02806
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment <input type="checkbox"/>					
Director Name Most Reverend Thomas J. Tobin			Director Name Reverend 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 Reverend Timothy D. Reilly			Director Name Nicholas Alteri		
Street Address 341 Maple Avenue			Street Address 7 Highland Avenue		
City Barrington	State RI	Zip 02806	City Barrington	State RI	Zip 02806
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.					
<i>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee</i>					
Name of Officer/Authorized Representative Reverend Timothy D. Reilly, Administrator/Secretary/Treasurer				Date 3/14/2023	
Signature of Officer/Authorized Representative 				FILED	

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

MAR 31 2023 12:42
 BY 
 FORM 831 - Revised: 2/2023

LEGAL TITLE OF CORPORATION:

Holy Angel's Church Corporation

ADDITIONAL DIRECTOR:

Peter DeAngelis

Lay Trustee