RI SOS Filing Number: 202334541190 Date: 4/28/2023 4:00:00 PM



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year:					
Non-Profit Corporation					

2023

RECEIVE STATE R.I. DEPT. OF STATE R.I. BUS SYCS DIV

1013 NPR 28 A 11: 48

→ Filing period February 1 - May 1

→ Filing Fee: \$20.00

-> Penalty Additional \$25 00 fee if form is not filed by May 31

1 Entity ID Number	2. Exact name of the Corporation					
28275	Bishop McVinney Regional School					
3. State of Incorporation	5 Brief description of the character of business conducted in Rhode Island					
Rhode Island	Religious, charitable and educational activities.					
4. NAICS Code						
813110 - Religious Organizations						
6. Principal Office Address			City	State	Zip	
One Cathedral Square			Providence	RI	02903	
7. List ALL officers (names and addresses) Check the box to indicate an attachment						
President Name Most Reverend Thomas J. Tobin			Vice-President Name Rev. Msgr. Albert A. Kenney			
Street Address One Cathedral Square			Street Address One Cathedral Square			
^{City} Providence	State RI	^{Zıp} 02903	^{City} Providence	State RI	^{Zip} 02903	
Secretary Name Rev. Timothy D. Reilly			Treasurer Name Most Reverend Thomas J. Tobin			
Street Address One Cathedral Square			Street Address One Cathedral Square			
^{City} Providence	State RI	^{Zip} 02903	^{City} Providence	State RI	^{Zıp} 02903	
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 Reverend Thomas J. Tobin			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	^{Z_{IP}} 02903	
Director Name Rev. Timothy D. Reilly			Director Name Dr. James Power			
Street Address One Cathedral Square			Street Address One Cathedral Square			
^{City} Providence	State RI	^{Zıp} 02903	^{City} Providence	State RI	^{Zip} 02903	
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, Received or Trustee						
Name of Officer/Authorized Representative Rev. Timothy D. Reilly, Secretary					723	
Signature of Officerus withorized Representative						
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MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov APR 28 2023

BY 73869

11.48

FORM 631 - Revised: 11/2021

28275

ADDITIONAL OFFICER:

Assistant Treasurer

Louis G. Hebert One Cathedral Square Providence, RI 02903

ADDITIONAL DIRECTOR:

Louis G. Hebert One Cathedral Square Providence, RI 02903