RI SOS Filing Number: 202335309230 Date: 5/4/2023 4:00:00 PM

De la constante de la constant

## 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

FILED	
MAY 04 2023, 7. BY 7883	, 2

1. Entity ID Number	2. Exact name	e of the Corporation				
53910	Saint Ce	Saint Cecilia's Church Corporation				
3. State of Incorporation	5. Brief descri Religious	5. Brief description of the character of business conducted in Rhode Island Religious				
4. NAICS Code 813110						
6. Principal Office Address 755 Central Avenue			City Pawtucket	State RI	Zip 02861	
7. List ALL officers (names an	d addresses)		CI	heck the box to indicate a	an attachment	
President Name Most Rev. Thomas J. Tobin, DD			Vice-President Name Rev. Msgr. Albert A. Kenney			
Street Address One Cathedral Square			Street Address One Cathedral Square			
<sup>City</sup> Providence	State RI	<sup>Zip</sup> 02903	City Providence	State RI	Zip 02903	
ecretary Name Rev. Stephen M. Battey			Treasurer Name Rev. Stephen M. Battey			
Street Address 755 Central Avenue			Street Address 755 Central Avenue			
<sup>City</sup> Pawtucket	State RI	<sup>Zip</sup> 02861	City Pawtucket	State RI	02861	
8. List ALL directors (names a	nd addresses). RI C	corporations MUST		heck the box to indicate	an attachment	
Director Name Most. Rev. Thomas J. Tobin, DD			Director Name Rev. Msgr. Albert A. Kenney			
Street Address One Cathedral Square			Street Address One Cathedral Square			
<sup>City</sup> Providence	State RI	<sup>Zip</sup> 02903	City Providence	State RI	Zip 0 <b>2</b> 903	
Director Name Rev. Stephen M. Battey			Director Name Ms. Lorraine Lussier			
Street Address 755 Central Avenue			Street Address 27 Bowen Street			
<sup>City</sup> Pawtucket	State RI	<sup>Zip</sup> 02861	<sup>City</sup> Pawtucket	State RI	Zip 02861	
9. The Registered Agent infor	mation of record with	the RI Department	t of State is accurate. Changes	require filing Form 64	1.	
Under penalty of perjury, I d statements, and that all stat			ed this report, including any a d correct.	accompanying sched	lules and	
This report must be signed by either th	e President, Vice-Preside	nt, Secretary, Assistant S	Secretary, Treasurer, duly Authorized Re	presentative, Receiver or Tri	ustee.	
Name of Officer/Authorized Representative				Date		
Rev. Stephen M. Battey				April 28, 2023		
Signature of Officer/Authorized		the				

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.n.gov

Director #5 Mr. Albert Ferland 158 Greenslitt Avenue Pawtucket, RI 02861

FILED

MAY 04 2023 BY 7883