RI SOS Filing Number: 202335495410 Date: 5/10/2023 4:00:00 PM

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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

1. Entity ID Number 29184		2. Exact name of the Corporation Church of Saint Leo the Great in Pawtucket				
3. State of Incorporation RI	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 and addresses) Check the box to indicate an attachment						
President Name Most Rev. 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 .	^{Zip} 02903	City Providence	State RI	Zip 02903	
Secretary Name Rev. Stephen M. Battey			Treasurer Name Rev. Stephen M. Battey			
Street Address 755 Central Avenue			Street Address 755 Central Avenue			
^{City} Pawtucket	State RI	^{Zip} 02861	City Pawtucket	State RI	^{Zip} 02861	
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 Rev. 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	Zip 02903	
Director Name Rev. Stephen M. Battey			Director Name Ms. Lorraine Lussier			
Street Address 755 Central Avenue			Street Address 27 Bowen Street			
^{City} Pawtucket	State RI	^{Zip} 02861	^{City} Pawtucket	State RI	Zip 02861	
9. The Registered Agent information	n of record with t	he RI Department	of State is accurate. Changes require	e filing Form 641.		
Under penalty of perjury, I declar statements, and that all statements	e and affirm tha nts contained he	it I have examine erein are true and	d this report, including any accom i correct.	panying schedule	s and	
This report must be signed by either the Pres	ident, Vice-President,	Secretary, Assistant Si	ecretary, Treesurer, duly Authonized Represente	tive, Receiver or Truste	θ.	
Name of Officer/Authorized Representative Date						
Rev. Stephen M. Battey				04/28/2023		
Signature of Officer/Authorized Rep	resentative	#				

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov II) 291811

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

FILED

MAY 10 2023

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