RI SOS Filing Number: 202336039000 Date: 5/24/2023 4:00:00 PM

State of Rhode Island  Department of State - Business Services Division				FILED	
Annual Report for the year: 2023			MAY 2 4 2023		
Non-Profit Corporation			£		1
→ Filing period: February 1 - May 1 → Filing Fee: \$20.00		E.	innet track	-	
→ Penalty: Additional \$25.00 fee if			()	<u>/</u>	
1. Entity ID Number 000030161	2. Exact name of the Corporation St. Joseph's Church				
3. State of Incorporation	Brief description of the character of business conducted in Rhode Island				
Rhode Island	Roman Catholic Church				
4. NAICS Code					
813110-Religious Org.					:
6. Principal Office Address	<u></u>		City	State	Ζιp
195 Walcott St.			Pawtucket	RI	02860
7. List ALL officers (names and add	resses)	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		
<sup>City</sup> Providence	State RI	<sup>Zip</sup> 02903	<sup>City</sup> Providence,	State RI	<sup>Дір</sup> 02903
Secretary Name Rev. Joseph Craddock			Treasurer Name Rev. Joseph Craddock		
Street Address 195 Walcott St			Street Address 195 Walcott St.		
<sup>City</sup> Pawtucket	State RI	<sup>Zip</sup> 02860	City Pawtucket	State RI	7 02860
B. 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		
<sup>City</sup> Providence	State RI	<sup>Zip</sup> 02903	City Providence	State RI	<sup>Zip</sup> 02903
Director Name Rev. Joseph Craddock			Director Name tephen Kilmartin		
Street Address 195 Walcott St.			Street Address 284 Woodhaven Rd.		
<sup>City</sup> Pawtucket	State RI	<sup>Zip</sup> 02860	<sup>City</sup> Pawtucket	State RI	راب 02860
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, Receiver or Trustee					
Name of Officer/Authorized Representative				Date	
Kev. Joseph F. Craddock				05 18 2	3
Signature of Officer/Authorized Representative  Rev Grandork					

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

Website: www.sos.ri.gov

TO 200 FORM 631 ADDENDUM

ST. JOSEPH CHURCH 195 WALCOTT STREET 14 WTOCKET, RI FILED

MAY 2 4 2023

DIBECTOR NAME:

PATRICIA MARTINEZ 142 DAKLAND AVENUE PAWTUCKET, RI 02861