RI SOS Filing Number: 202446485740 Date: 2/17/2024 4:00:00 PM

State of Rhode Island **Department of State - Business Services Division**

FILED

Annual Report for the year: $\hat{\epsilon}$	2024	
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Non-Profit Corporation

 → Filing period: February 1 - May 1 → Filing Fee: \$20.00 			EV		\preceq ,			
-> Penalty: Additional \$25.00 fee if	form is not filed by	May 31.	<u> </u>					
Entity ID Number	2. Exact name of the Corporation							
000030189	Saint Joseph's Church, Woonsocket							
3. State of Incorporation	5. Brief descripti	5. Brief description of the character of business conducted in Rhode Island						
RI	non-profit, re	non-profit, religious, charitable						
4. NAICS Code	1							
813110								
6. Principal Office Address		· ,	City	State	Zip			
1200 Mendon Road			Woonsocket	RI	02895			
7. List ALL officers (names and addresses) Check the box to incicate an attachment								
President Name Most Rev. Richard G. Henning			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. Ryan J. Krocka-Simas			Treasurer Name Rev. Ryan J. Krocka-Simas					
Street Address 1200 Mendon Road			Street Address 1200 Mendon Road					
^{City} Woonsocket	State RI	^{Zip} 02895	City Woonsocket	State RI	Zio 02895			
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors.								
Director Name Name Director N								
Director Name Most Rev. Richard G. Henney			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 02895			
Director Name Rev. Ryan J. Krocka-Simas			Drector Name Julien P. Ayotte					
Street Address 1200 Mendon Road			Street Address 107 Old River Road Unit 88					
^{City} Woonsocket	State RI	^{Zip} 02895	City Lincoln	State RI	Zip 02865			
9. The Registered Agent informatio	n of record with th	e 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				
Rev. Ryan J. Krocka-	02/06/2024							
Signature of Officer/Authorized Representative								

MAIL TO:

Division of Business Services

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

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

000030189 Saint Joseph's Church, Woonsocket

ADDITIONAL DIRECTOR

Edwin Burke

52 Hillsdale Street

Woonsocket, RI 02895

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FER 0.7 2024