RI SOS Filing Number: 202446030300 Date: 2/8/2024 1:36:00 PM



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2024

Non-Profit Corporation

→ Filing period February 1 - May 1

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→ Filing Fee: \$20.00 → Penalty Additional \$25,00 fee if form is not filed by May 31.							
1. Entity ID Number 29355	2. Exact name of the Corporation St. Edward's Church of Pawtucket						
3. State of Incorporation	Brief description of the character of business conducted in Rhode Island						
Rhode Island	Religious, charitable and educational activities.						
4. NAICS Code							
813110							
6. Principal Office Address			City	State	Zıp		
103 Pine Street			Pawtucket	RI	02860		
7. List ALL officers (names and add	iresses)	Check the box to indicate 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	Slate RI	^{Zip} 02903	^{City} Providence	State RI	^{Z_{IP}} 02903		
Secretary Name James D. Shanaghan			Treasurer Name Rev. Brendan J. Rowley				
Street Address 40 Marbury Avenue			Street Address 103 Pine Street				
^{City} Pawtucket	State RI	^{Zip} 02860	City Pawtucket	State RI	^{Zip} 02860		
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. Richard G. Henning			Director Name Rev. Msgr. Albert A. Kenney				
Street Address One Cathedral Square			Street Address One Cathedral Sqaure				
^{City} Providence	State RI	^{Zip} 02903	City Providence	State RI	Zip UŽ S U J		
Director Name Rev. Brendan J. Rowley			Director Name James D. Shanaghan				
Street Address 103 Pine Street			Street Address 40 Marbury Avenue				
^{City} Pawtucket	State RI	^{Zip} 02860	^{City} Pawtucket	State RI	Zip 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 Trusfee							
Name of Officer/Authorized Representative Eugene G. Bernardo II, Authorized Representative				Date (25/2029			
Signature of efficer/Authorized Representative							
FILED							

Division of Business Services

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

Phone: (401) 222-3040

Website: www.sos.ri.gov

FORM 631- Revised: 12/2023

St. Edward's Church of Pawtucket

29355

ADDITIONAL DIRECTOR:

Margaret Sheehy 109 Blaisedell Avenue Pawtucket, RI 02860