

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street

Providence, RI 02904-2615

401.222.3040

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 200

Filing Period: June 1 - June 30 • Filing Fee: \$20.00* • THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.

* In accordance with R.I.G.L. 7-6-94, each corporation failing or refusing to file its annual report within the time prescribed by law (R.I.G.L. 7-6-91) is subject to a penalty fee of \$25.00. 1. Corporate ID No. 2. Name of Corporation 000029100 Societa di Mutuo Soccorso San Bartolommeo 4. Corporate address in Rhode Island - Street Address City Zip 3. State of Incorporation Providence 02909 Rhode Island 66 Sophia Street City State 5. Foreign corporation. Enter principal office address Zip6. Brief Description of the character of the affairs which are actually conducted in Rhode Island social club 7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) | FILL IN SPACES BEFORE USING ATTACHMENTS President Name Vice President Name Pelegrino Maselli Joseph Spizziri Street Address Street Address 15 Washington Drive 50 Heritage Drive City State ZipState ZipRI RI 02864 Johnston 02919 Cumberland Secretary Name Treasurer Name David De Costa Ludovico D'Arezzo Street Address Street Address 222 Garden City Drive 90 Morefield Street State Ziр State Ζip RI 02920 Providence 02909 Cranston RI 8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23 Director Name Philip Almagno Ronald Grande Street Address 289 Pocassett Avenue 16 Hornbine Street State Zip State Providence RΙ 02909 Cranston RΙ Director Name Ralf Laurenza Paul Yacovone Street Address Street Address 93 Woodview Drive 549 Union Avenue City State Zip State 02920 RI Providence Cranston RI 02909 9. REGISTERED AGENT IN RHODE ISLAND This information is currently of record in the Office of the Secretary of State. Changes require filing of Form 641 - R.I.G.L. 7-6-13/7-6-78

This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

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File Date	FILED
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	OR SECRETARY OF STATE USE ONLY

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Under penalty of perjury, I declare and affirm that report, including any accompanying schedules and s	
Secure of the second of the se	11-2-09
Signature of Officer	Date
Pelligrino Maselli	
Print or Type Name of Officer	
President	
Title of Officer	Form 631 Rev 09/17

ATTACHMENT

Directors

Edward De Matteis 72 Landsdowne Road Warwick, RI 02888

John Desimone, Jr. 35 Noella Avenue Coventry, RI 02816

Harold Arcaro 589 Atwells Avenue, Unit 3J Providence, RI 02909

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