



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State - Division of Business Services  
148 W. River Street, Providence, Rhode Island 02904-2615  
Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

## NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2015

Filing Period: June 1 - June 30 • This report must be typed or printed legibly.

Filing Fee: \$20.00 • FAILURE TO FILE THIS REPORT BY JULY 30 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. <u>26285</u>		2. Exact name of the Corporation <u>Dodge Goulais Post 29</u>			
3. State of Incorporation <u>R.I.</u>		4. Brief description of the character of business conducted in Rhode Island <u>Fraternal B'nai B'rith</u>			
5. Principal office address <u>1108 Charles St.</u>		City <u>North Prov.</u>		State <u>R.I.</u>	Zip <u>02904</u>
6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>					
President Name <u>Joseph Talbert</u>		Vice-President Name <u>Thomas Lolio</u>			
Street Address <u>27 Woodward Rd.</u>		Street Address <u>8 May St.</u>			
City <u>Lincoln</u>	State <u>R.I.</u>	Zip <u>02865</u>	City <u>N. Prov.</u>	State <u>R.I.</u>	Zip <u>02904</u>
Secretary Name <u>Joseph Talbert</u>		Treasurer Name <u>Gerald Tramuntano</u>			
Street Address <u>27 Woodward Rd.</u>		Street Address <u>5 Remington St.</u>			
City <u>Lincoln</u>	State <u>R.I.</u>	Zip <u>0</u>	City <u>N. Prov.</u>	State <u>R.I.</u>	Zip <u>02904</u>
7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name <u>Joseph Talbert</u>		Director Name <u>John A. Dore</u>			
Street Address <u>27 Woodward Rd.</u>		Street Address <u>120 Woodward Rd.</u>			
City <u>Lincoln</u>	State <u>R.I.</u>	Zip <u>02865</u>	City <u>Prov.</u>	State <u>R.I.</u>	Zip <u>02904</u>
Director Name <u>Joe Baker</u>		Director Name			
Street Address <u>39 Lydia Ave.</u>		Street Address			
City <u>N. Prov.</u>	State <u>R.I.</u>	Zip <u>02904</u>	City	State	Zip
8. REGISTERED AGENT IN RHODE ISLAND					
This information is currently of record in the Office of the Secretary of State. Changes require filing Form 641.					

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

**FILED**

**MAY 04 2015**

File Date

Check No

By: BY 8043

FOR SECRETARY OF STATE USE ONLY

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.

Signature of Officer or Authorized Representative

Date

Gerald Tramuntano  
Print or Type Name of Officer or Authorized Representative