



State of Rhode Island and Providence Plantations  
Office of the Secretary of State

Fee: \$20.00

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

Non-Profit Corporation  
Annual Report

Filing Period: June 1 - June 30

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.

ANNUAL REPORT YEAR: 2016

1. Corporate ID No. 000122749

2. Name of Corporation St. John's Lodge Masonic Corporation

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: P.O. BOX 587  
City or Town: PORTSMOUTH State: RI Zip: 02871 Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street:

City or Town: State: Zip: Country:

6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island

PLANNING, CONSTRUCTING, ERECTING, OPERATING AND MANAGING LAND AND BUILDINGS.

7. Names and Addresses of the Officers and Directors:

**All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**

*THE NUMBER OF DIRECTORS OF A DOMESTIC(RHODE ISLAND)CORPORATION SHALL NOT BE LESS THAN THREE(3). R.I.G.L. 7-6-23*

Title	Individual Name	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
PRESIDENT	WILLIAM HEDGCORTH	48 LOUISE DRV TIVERTON, RI 02878 USA
TREASURER	MAURICE WARREN	120 WATER ST PORTSMOUTH, RI 02871 USA

SECRETARY	RICHARD QUEERN	68 CAPTAIN CIR. TIVERTON, RI 02871 USA
DIRECTOR	SCOTT JAMIESON	90 NORMAN DRV. TIVERTON, RI 02878 USA
DIRECTOR	WILLIAM HEDGCORTH	48 LOUISE DRV TIVERTON, RI 02878 USA
DIRECTOR	DENNIS GOMES	46 BENJAMIN ST FALL RIVER, MA 02724 USA

**8. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER  
Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78**

MAURICE WARREN 120 WATER STREET PORTSMOUTH , RI 02871

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

**Signed this 25 Day of May, 2016 at 11:29:36 AM by the authorized person. This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-6.**

By MAURICE WARREN  
Signature of Authorized Person

Form No. 631  
Revised 09/07