



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Matthew A. Brown, Secretary of State

Corporations Division
100 North Main Street
Providence, RI 02903-1335
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 12203		2. Name of Corporation Smith-Mason Funeral Home, Inc.			
3. Street Address Principal Business Office 398 Willett Avenue			City Riverside	State RI	Zip 02915
4. Business Phone No. (401) 433-2300		5. State of Incorporation RHODE ISLAND			6. SIC Code 8532
7. Brief Description of the Character of Business Conducted in Rhode Island FUNERAL HOME					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Robert E. Mason			Vice President Name James R. Melia		
Street Address 6 Ledge Road			Street Address 9 Ike Street		
City Barrington	State RI	Zip 02806	City Cumberland	State RI	Zip 02864
Secretary Name Mark E. Mason			Treasurer Name Robert E. Mason		
Street Address 6 Ledge Road			Street Address 6 Ledge Road		
City Barrington	State RI	Zip 02806	City Barrington	State RI	Zip 02806
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name XXXXXXXXXX			Vice President May Z. Smith		
Street Address			Street Address 6 Ledge Road		
City	State	Zip	City Barrington	State RI	Zip 02806
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
AUTHORIZED SHARES					
Number of Shares		Class Series	Par Value		
350		\$300.00	PAR VALUE, 500	NO PAR VALUE	
11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
ISSUED SHARES					
Number of Shares		Class Series	Par Value		
140		Preferred	\$300.00		
230		Common	- - - -		

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



File Date	1/12/05
Check No.	1710
By:	DA
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.

Robert E. Mason 1/10/05
Signature of Officer Date
Robert E. Mason
Print or Type Name of Officer
President
Title of Officer



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Matthew A. Brown, Secretary of State

Corporations Division
100 North Main Street
Providence, RI 02903-1333
401.222.304

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 12203		2. Name of Corporation Smith-Mason Funeral Home, Inc.			
3. Street Address Principal Business Office 398 Willett Avenue			City Riverside,	State RI	Zip 02915
4. Business Phone No. (401) 433-2300		5. State of Incorporation RHODE ISLAND			6. SIC Code 8532
7. Brief Description of the Character of Business Conducted in Rhode Island FUNERAL HOME					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Robert E. Mason			Vice President Name May Z. Smith		
Street Address 6 Ledge Road			Street Address 398 Willett Avenue		
City Barrington	State RI	Zip 02806	City Riverside,	State RI	Zip 02915
Secretary Name Robert E. Mason			Treasurer Name Charles A. Mason		
Street Address 6 Ledge Road			Street Address 398 Willett Avenue		
City Barrington	State RI	Zip 02915	City Riverside	State RI	Zip 02915
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
350	\$300.00 PAR VALUE, 500 NO PAR VALUE		350	Preferred	\$300.00
			345	Common	NPV

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



* 1 2 2 0 3 *

File Date	1-16-04
Check No.	21666
By:	[Signature]
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.

Robert E. Mason Jan 13, 2004
Signature of Officer Date
Robert E. Mason President/Secretary
Print or Type Name of Officer
Title of Officer



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Edward S. Inman, III, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003
Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No.

2. Name of Corporation

12203

Smith-Mason Funeral Home, Inc.

3. Street Address Principal Business Office

City

State

Zip

398 Willett Avenue

East Providence

RI

02915

4. Business Phone No.

5. State of Incorporation

6. SIC Code

433-2300

RHODE ISLAND

8532

7. Brief Description of the Character of Business Conducted in Rhode Island

Funeral Home

8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name

Robert E. Mason

Vice President Name

May Z. Smith

Street Address

6 Ledge Road

Street Address

398 Willett Avenue

City

State

Zip

City

State

Zip

Barrington, RI

RI

02806

Riverside

RI

02915

Secretary Name

Robert E. Mason

Treasurer Name

Charles A. Mason

Street Address

6 Ledge Road

Street Address

398 Willett Avenue

City

State

Zip

City

State

Zip

Barrington

RI

02806

Riverside

RI

02915

9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name

Director Name

Street Address

Street Address

City

State

Zip

City

State

Zip

Director Name

Director Name

Street Address

Street Address

City

State

Zip

City

State

Zip

10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

350 \$300.00 PAR VALUE, 500 NO PAR VALUE

11. SHARES ISSUED ("X" BOX FOR ATTACHMENT)

ISSUED SHARES

Number of Shares

Class/Series

Par Value

350

Preferred

\$300.00

345

Common

NPV

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



* 1 2 2 0 3 *

File Date: 1-16-03

Check No.: 20230

By: UP

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: Robert E. Mason Date: Jan. 14, 2003

Print or Type Name of Officer: Robert E. Mason President/Secretary



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Edward S. Inman, III, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002
Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **12203** 2. Name of Corporation **Smith-Mason Funeral Home, Inc.**
3. Street Address Principal Business Office **398 Willett Avenue** City **East Providence** State **RI** Zip **02915**
4. Business Phone No. **433-2300** 5. State of Incorporation **RI** 6. SIC Code **8532**
7. Brief Description of the Character of Business Conducted in Rhode Island

Funeral Home

8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name Robert E. Mason Street Address 6 Ledge Road City Barrington State RI Zip 02906	Vice President Name May Z. Smith Street Address 48 Village Drive City East Providence State RI Zip 02915
Secretary Name Robert E. Mason Street Address 6 Ledge Road City Barrington State RI Zip 02806	Treasurer Name Charles A. Mason Street Address 398 Willett Avenue City East Providence State RI Zip 02915

9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name Street Address City State Zip	Director Name Street Address City State Zip
Director Name Street Address City State Zip	Director Name Street Address City State Zip

10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares	Class/Series	Par Value
------------------	--------------	-----------

350 @ \$300, 500 no par

11. SHARES ISSUED ("X" BOX FOR ATTACHMENT)

ISSUED SHARES

Number of Shares	Class/Series	Par Value
------------------	--------------	-----------

350	Preferred	\$300.
245	Common	NPV

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

File Date: 3/19/02

Check No.: 18967

By: RB

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.

Robert E. Mason Mar. 15, 2002
Signature of Officer Date

Robert E. Mason President/Secretary
Print or Type Name of Officer

Title of Officer



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Corporations Division
100 North Main Street, Providence, RI 02903-1331
401-222-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **12203** 2. Name of Corporation **Smith-Mason Funeral Home, Inc.**

3. Street Address Principal Business Office

398 Willett Avenue

4. Business Phone No.

433-2300

5. State of Incorporation
RHODE ISLAND

City

East Providence

State

RI

Zip

02915

6. SIC Code
8532

7. Brief Description of the Character of Business Conducted in Rhode Island

Funeral Home

8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name

Vice President Name

Robert E. Mason

May Z. Smith

Street Address

Street Address

6 Ledge Road

48 Village Drive

City

State

Zip

City

State

Zip

Barrington

RI

02806

East Providence

RI

02915

Secretary Name

Treasurer Name

Robert E. Mason

Charles A. Mason

Street Address

Street Address

6 Ledge Road

398 Willett Avenue

City

State

Zip

City

State

Zip

Barrington

RI

02806

Riverside

RI

02915

9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name

Director Name

Street Address

Street Address

City

State

Zip

City

State

Zip

Director Name

Director Name

Street Address

Street Address

City

State

Zip

City

State

Zip

10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

350 @ \$300, 500 NO PAR

11. SHARES ISSUED ("X" BOX FOR ATTACHMENT)

ISSUED SHARES

Number of Shares

Class/Series

Par Value

350

Preferred

\$300.00

245

Common

NPV

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



* 1 2 2 0 3 *

File Date: 4-9-01

Check No.: 16950

By: [Signature]

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] Feb. 23, 2001
Signature of Officer Date

Robert E. Mason President/Secretary

Print or Type Name of Officer

Title of Officer



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1333
401-222-3046



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.

2. Name of Corporation

12203

Smith-Mason Funeral Home, Inc.

3. Street Address Principal Business Office

398 Willett Avenue

City

East Providence RI

State

Zip

02915

4. Business Phone No.

433-2300

5. State of Incorporation

RHODE ISLAND

6. SIC Code

8532

7. Brief Description of the Character of Business Conducted in Rhode Island

Funeral Home

8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT)

FILL IN SPACES BEFORE USING ATTACHMENTS

President Name

Robert E. Mason

Vice President Name

May Z. Smith

Street Address

6 Ledge Road

Street Address

48 Village Drive

City

Barrington

State

RI

Zip

02806

City

East Providence

State

RI

Zip

02915

Secretary Name

Robert E. Mason

Treasurer Name

Charles A. Mason

Street Address

6 Ledge Road

Street Address

398 Willett Avenue

City

Barrington,

State

RI

Zip

02816

City

Riverside

State

RI

Zip

02915

9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT)

FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name

Director Name

Street Address

Street Address

City

State

Zip

City

State

Zip

Director Name

Director Name

Street Address

Street Address

City

State

Zip

City

State

Zip

10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

350 @ \$300, 500 NO PAR

11. SHARES ISSUED ("X" BOX FOR ATTACHMENT)

ISSUED SHARES

Number of Shares

Class/Series

Par Value

350

Preferred

\$300.00

245

Common

NPV

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



* 1 2 2 0 3 *

File Date:

2/24/00

Check No.:

15223

By:

GAM

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

Robert E. Mason

Print or Type Name of Officer

Date

2/23/00

President/Secretary

Title of Officer



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR **1999**
Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)



1. Corporate ID No. 12203		2. Name of Corporation Smith-Mason Funeral Home, Inc.			
3. Street Address Principal Business Office 398 Willett Avenue		City East Providence	State R I	Zip 02915	
4. Business Phone No. 433-2300	5. State of Incorporation Rhode Island		6. SIC Code 8532		
7. Brief Description of the Character of Business Conducted in Rhode Island Funeral Home					
8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Robert E. Mason		Vice President Name May Z. Smith			
Street Address 6 Ledge Road		Street Address 15 Hanson Road			
City Barrington	State R I	Zip 02806	City Barrington	State R I	Zip 02806
Secretary Name Robert E. Mason		Treasurer Name Charles A. Mason			
Street Address 6 Ledge Road		Street Address 398 Willett Avenue			
City Barrington	State R I	Zip 02806	City Riverside	State R I	Zip 02915
9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name		Director Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
Director Name		Director Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT)		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
350 @ \$300, 500 NO PAR			350	Preferred	\$300.00
			245	Common	NPV

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



* 1 2 2 0 3 *

File Date: Mar 1, 99
Check No.: 13478
By: 90

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: Charles A. Mason Date: Mar 1, 99
Charles A. Mason Treasurer
Print or Type Name of Officer
Treasurer
Title of Officer



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-277-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

1998

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.

12203

2. Name of Corporation

Smith-Mason Funeral Home, Inc.

3. Street Address Principal Business Office

398 Willett Avenue

City

Riverside

State

RI

Zip

02915

4. Business Phone No.

(401) 433-2300

5. State of Incorporation

RHODE ISLAND

6. SIC Code

8532

7. Brief Description of the Character of Business Conducted in Rhode Island

Funeral Service

8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT)

President Name

Robert E. Mason

Street Address

6 Ledge Road

City

Barrington

State

RI

Zip

02806

Secretary Name

Robert E. Mason

Street Address

6 Ledge Road

City

Barrington

State

RI

Zip

02806

Vice President Name

May Z. Smith

Street Address

15 Hanson Road

City

Barrington

State

RI

Zip

02806

Treasurer Name

Charles A. Mason

Street Address

398 Willett Avenue

City

Riverside

State

RI

Zip

02915

9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT)

Director Name

none

Street Address

City

State

Zip

Director Name

Street Address

City

State

Zip

Director Name

Street Address

City

State

Zip

Director Name

Street Address

City

State

Zip

10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

350

Preferred

\$300.00

500

Common

NPV

11. SHARES ISSUED ("X" BOX FOR ATTACHMENT)

ISSUED SHARES

Number of Shares

Class/Series

Par Value

350

Preferred

\$300.00

245

Common

NPV

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



* 1 2 2 0 3 *

File Date: 3.2.98

Check No.: 11912

By: 10P

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: Robert E. Mason Date: 2/27/98

Print or Type Name of Officer: Robert E. Mason

Title of Officer: President/Secretary 2/27/98



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-277-3040



PROFIT CORPORATION ANNUAL REPORT 1997

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(i) MUST BE TYPED IN BLACK)

1. Corporate ID No.

12203

2. Name of Corporation

Smith-Mason Funeral Home, Inc.

3. Street Address Principal Business Office

398 Willett Avenue

City

Riverside

State

RI

Zip

02915

4. Business Phone No.

(401) 433-2300

5. State of Incorporation

RHODE ISLAND

6. SIC Code

8532

7. Brief Description of the Character of Business Conducted in Rhode Island

Funeral Service

8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT)

President Name

Robert E. Mason

Street Address

6 Ledge Road

City

Barrington

State

RI

Zip

02806

Vice President Name

May Z. Smith

Street Address

15 Hanson Road

City

Barrington

State

RI

Zip

02806

Secretary Name

Robert E. Mason

Street Address

6 Ledge Road

City

Barrington

State

RI

Zip

02806

Treasurer Name

Charles A. Mason

Street Address

398 Willett Avenue

City

Riverside

State

RI

Zip

02915

9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT)

Director Name

Street Address

City

State

Zip

Director Name

Street Address

City

State

Zip

Director Name

Street Address

City

State

Zip

Director Name

Street Address

City

State

Zip

10. SHARES AUTHORIZED AND ISSUED ("X" BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

SEE NOTES

350

Preferred

\$300.00

500

Common

NPV

ISSUED SHARES

Number of Shares

Class/Series

Par Value

350

Preferred

\$300.00

245

Common

NPV

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



* 1 2 2 0 3 *

Date: 2/4/97

Check No.: 10098

By: [Signature]

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]
Signature of Officer Date

Robert E. Mason

Print or Type Name of Officer

President/Secretary 2/3/97
Title of Officer

PROFIT CORPORATION ANNUAL REPORT

1996



State of Rhode Island and Providence Plantations
James R. Langevin, *Secretary of State*
Corporations Division
100 North Main Street
Providence, Rhode Island 02903-1335 • (401) 277-3040

Filing Period: January 1–March 1

Filing Fee: \$50.00

PLEASE TYPE OR PRINT IN BLACK INK.

1. CORPORATE ID NO. 12203		2. NAME OF CORPORATION Smith-Mason Funeral Home, Inc.	
3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE 398 Willett Avenue		CITY Riverside	STATE RI
		ZIP CODE 02915	
4. BUSINESS PHONE NO. (401) 433-2300	5. STATE OF INCORPORATION RHODE ISLAND		6. SIC CODE 8532
7. BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE ISLAND Funeral Service			

8. NAMES AND ADDRESSES OF THE OFFICERS			
PRESIDENT NAME Robert E. Mason		VICE PRESIDENT NAME May Z. Smith	
STREET ADDRESS 6 Ledge Road		STREET ADDRESS 15 Hanson Road	
CITY Barrington	STATE RI	CITY Barrington	STATE RI
ZIP CODE 02806		ZIP CODE 02806	
SECRETARY NAME Robert E. Mason		TREASURER NAME Charles A. Mason	
STREET ADDRESS 6 Ledge Road		STREET ADDRESS 398 Willett Avenue	
CITY Barrington	STATE RI	CITY Riverside	STATE RI
ZIP CODE 02806		ZIP CODE 02915	

9. NAMES AND ADDRESSES OF THE DIRECTORS			
DIRECTOR NAME		DIRECTOR NAME	
STREET ADDRESS		STREET ADDRESS	
CITY	STATE	CITY	STATE
ZIP CODE		ZIP CODE	
DIRECTOR NAME		DIRECTOR NAME	
STREET ADDRESS		STREET ADDRESS	
CITY	STATE	CITY	STATE
ZIP CODE		ZIP CODE	

10. SHARES AUTHORIZED AND ISSUED					
AUTHORIZED SHARES			ISSUED SHARES		
NUMBER OF SHARES	CLASS / SERIES	PAR VALUE	NUMBER OF SHARES	CLASS / SERIES	PAR VALUE
350	Prefered	\$300.00	350	Prefered	\$300.00
500	Common	NPV	245	Common	NPV

This report must be **SIGNED IN INK** by either the
President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

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.

File Date:

2/9/96

Check No:

8627

By:

cc tip

Signature of Officer

Robert E. Mason
Print or Type Name of Officer

President/Secretary

2/7/96

Title of Officer

Date

For Secretary of State Use Only

DETACH BOTTOM BEFORE RETURNING

FORM 31-1005

State of Rhode Island and Providence Plantations



Office of The Secretary of State
100 North Main Street
Providence, Rhode Island 02903-1335
401-277-3040

ANNUAL REPORT

Please Type or Print
File Annually - Jan. 1 - March 1
Filing Fee \$50.00

Make Checks Payable to: Secretary of State

ck. 7285
(2)

ALL ENTRIES MUST BE COMPLETED IN FULL OR THE FORM WILL BE RETURNED.

Corporate ID: 0012203 Annual Report for the year: 1995

Name of Corporation: Smith-Mason Funeral Home, Inc.

Business entity organized under the laws of the State of:

Business Entity is (check one):

For foreign entity, address and telephone number of principal office:

☒ Business Corporation (See RIGL Chapter 7-1.1)

☐ Professional Service Corporation (See RIGL Chapter 7-5.1)

Phone: ()

Brief statement of the character of business conducted in Rhode Island:

Address and telephone of the principal office of business entity in Rhode

Funeral Home

Island (Provide street address - Not P.O. Box):

398 Willett Avenue

East Providence, R I 02915

Phone: (401) 433-2300

THE NAMES OF THE OFFICERS ARE:

PRESIDENT	STREET ADDRESS	CITY/STATE	ZIP CODE
Robert E. Mason	6 Ledge Road	Barrington, R I	02806
VICE PRESIDENT	STREET ADDRESS	CITY/STATE	ZIP CODE
May Z. Smith	15 Hanson Road	Barrington, R I	02806
SECRETARY	STREET ADDRESS	CITY/STATE	ZIP CODE
Robert E. Mason	6 Ledge Road	Barrington, R I	02806
TREASURER	STREET ADDRESS	CITY/STATE	ZIP CODE
Charles A. Mason	398 Willett Avenue	Riverside, R I	02915

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
Robert E. Mason	6 Ledge Road	Barrington, R I	02806
NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
Charles A. Mason	398 Willett Avenue	Riverside, R I	02915
NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
May Z. Smith	15 Hanson Road	Barrington, R I	02806

NUMBER OF SHARES AUTHORIZED (Rider may be attached)

NUMBER OF SHARES ISSUED AND OUTSTANDING (Rider may be attached)

Number of Shares Class / Series

Number of Shares Class / Series

350 Preferred

350 Preferred

500 Common

345 Common

Date January 24, 19 95

By: Robert E. Mason

PRINT OR TYPE NAME OF OFFICER SIGNING

Form 31 1/95

TITLE OF OFFICER SIGNING

Secretary

DESIGNATED REGISTERED AGENT FOR SERVICE OF PROCESS:

PLEASE NOTE: If the registered office and/or registered agent indicated below is incorrect, Form 9 must be filed.

JOHN A. REID, III
270 HOSP. TR. TOWER.
PROVIDENCE RI 02903

Filing Fee \$50.00
Payable to: -
Secretary of State

PLEASE TYPE OR PRINT
State of Rhode Island and Providence Plantations
Office of The Secretary of State
100 North Main Street
Providence, Rhode Island 02903-1335
401-277-3040

FILE ANNUALLY
LLC: Sept. 1 - Nov. 1
CORP: Jan. 1 - March 1

Corporate ID: 0012203 Annual Report for the year: 1994

Name of Business Entity: Smith-Mason Funeral Home, Inc.

Business entity organized under the laws of the State of: Rhode Island

Federal Taxpayer Identification Number: [REDACTED]

For foreign entity, address and telephone number of principal office:

Phone: ()

Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box):

398 Willett Avenue

Riverside, RI 02915

Phone: (401) 433-2300

Business Entity is (check one):

- ☒ Business Corporation (See RIGL Chapter 7-1.1)
☐ Professional Service Corporation (See RIGL Chapter 7-5.1)
☐ Limited Liability Company (See RIGL 7-16)

Name, title and mailing address of contact person to whom communications may be directed:

John H. Reed III

270 Hosp. Trust Tower

Providence, RI 02903

Brief statement of the character of business conducted in Rhode Island:
Funeral Service and related business

Date of Organization: October 1, 1965

Date of Qualification to do business in Rhode Island (if foreign entity):

THE NAMES OF THE OFFICERS ARE:

	NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
<input checked="" type="checkbox"/> CHIEF EXECUTIVE OFFICER OR <input checked="" type="checkbox"/> PRESIDENT (Check One)	Robert E. Mason	6 Ledge Road	Barrington, RI	02806
<input type="checkbox"/> CHIEF OPERATING OFFICER OR <input checked="" type="checkbox"/> VICE PRESIDENT (Check One)	May Z. Smith	15 Hanson Road	Barrington, RI	02806
<input type="checkbox"/> CUSTODIAN OF RECORDS OR <input checked="" type="checkbox"/> SECRETARY (Check One)	Robert E. Mason	6 Ledge Road	Barrington, RI	02806
<input type="checkbox"/> CHIEF FINANCIAL OFFICER OR <input checked="" type="checkbox"/> TREASURER (Check One)	Charles A. Mason	38 Monmouth Drive	Riverside, RI	02915

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE

NUMBER OF SHARES AUTHORIZED (If Applicable)		NUMBER OF SHARES ISSUED AND OUTSTANDING (If Applicable)	
NUMBER	350 Preferred	NUMBER	350 Preferred
CLASS	500 Common	CLASS	345 Common
SERIES		SERIES	
PAR VALUE OR WITHOUT PAR	Preferred \$300.00 Common NPV	PAR VALUE OR WITHOUT PAR	Preferred \$300.00 Common NPV

Date: March 7, 1994, 19

By: [Signature]

Robert E. Mason Secretary

PRINT OR TYPE NAME OF OFFICER SIGNING

TITLE OF OFFICER SIGNING

Form 31 1/94

DESIGNATED REGISTERED OR RESIDENT AGENT FOR SERVICE OF PROCESS:

PLEASE NOTE: If the Corporation has changed its registered office and/or registered or resident agent, Form 9 or Form LLC 3 must be filed.

JOHN H. REID, III
270 HOSP. TR. TOWER
PROVIDENCE RI 02903

6-1-1994
125-1-1994
M859

Filing Fee \$50.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 0012203

Annual Report for the year 1993

FIRST: The name of the corporation is Smith-Mason Funeral Home, Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is Funeral Directing and Associated Practices

FOURTH: If foreign corporation, address of its principal office n/a

FIFTH: Business address in Rhode Island 398 Willett Avenue Box 4517
Riverside, RI 02915

SIXTH: Names and addresses of its directors and officers:

(Attach rider if necessary)

Address (including number, street, zip code)

Name	Office	Address (including number, street, zip code)
	Director	
	Director	
	Director	
Robert E. Mason	President	6 Ledge Road Barrington, RI 02806
May Z. Smith	Vice President	15 Hanson Road Barrington, RI 02806
Robert E. Mason	Secretary	6 Ledge Road Barrington, RI 02806
Charles A. Mason	Treasurer	38 Monmouth Drive Riverside, RI 02915

SEVENTH: Number of Shares authorized:

No. of Shares	Class
350	Preferred
500	Common

EIGHTH: Number of Shares issued:

No. of Shares	Class
350	Preferred
345	Common

Dated February 11, 1993

PAID
FEB 16 1993
Series
SECY OF STATE

Par Value
or statement that
shares are without
par value

\$300.00

NPV

Par Value
or statement that
shares are without
par value

\$300.00

NPV

Smith-Mason Funeral Home, Inc.

(Name of Corporation)

By

President/Secretary

Filing Fee \$50.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID.....0012203..... Annual Report for the year.....1992.....

FIRST: The name of the corporation is.....Smith-Mason Funeral Home, Inc.....

SECOND: It is incorporated under the laws of.....Rhode Island.....

THIRD: Character of business, briefly stated, is.....Funeral Directing and Associated Practices.....

FOURTH: If foreign corporation, address of its principal office.....n/a.....

FIFTH: Business address in Rhode Island.....398 Willett Avenue P.O. Box 4517.....
.....Riverside, R.I. 02915.....

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
.....	Director
.....	Director
.....	Director
Robert E. Mason	President	6 Ledge Road Barrington, R.I. 02806
May z. Smith	Vice President	15 Hanson Road Barrington, R.I. 02806
Robert E. Mason	Secretary	6 Ledge Road Barrington, R.I. 02806
Charles A. Mason	Treasurer	38 Monmouth Drive Riverside, R.I. 02915

SEVENTH: Number of Shares authorized:

No. of Shares	Class
350	Preferred
500	Common

PAID
Series

FEB 14 1992

SEC'Y OF STATE

Par Value
or statement that
shares are without
par value

\$300.00

NPV

EIGHTH: Number of Shares issued:

No. of Shares	Class
350	Preferred
345	Common

Par Value
or statement that
shares are without
par value

\$300.00

NPV

Dated.....February 12,..... 19 92..

.....Smith-Mason Funeral Home, Inc.....
(Name of Corporation)

By.....Robert E. Mason.....

(Report must be signed by an officer)

Title.....President/Secretary.....

Filing Fee \$50.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

55

Corporate ID 0012203 Annual Report for the year 1991

FIRST: The name of the corporation is Smith-Mason Funeral Home, Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is Funeral Directing and associated practices

FOURTH: If foreign corporation, address of its principal office n/a

FIFTH: Business address in Rhode Island 398 Willett Avenue P.O. Box 4517
Riverside, R.I. 02915

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
	Director	
	Director	
	Director	
Robert E. Mason	President	6 Ledge Road Barrington, R.I. 08206
May Z. Smith	Vice President	15 Hanson Road Barrington, R.I. 02806
Robert E. Mason	Secretary	6 Ledge Road Barrington, R.I. 02806
Charles A. Mason	Treasurer	38 Monmouth Drive Riverside, R.I. 02915

SEVENTH: Number of Shares authorized:

No. of Shares	Class
350	Preferred
500	Common

PAID
FEB 13 1991
SECY OF STATE

Par Value or statement that shares are without par value
\$300.00
NPV

EIGHTH: Number of Shares issued:

No. of Shares	Class
350	Preferred
345	Common

Par Value or statement that shares are without par value
\$300.00
NPV

Dated February 11, 19 91

Smith-Mason Funeral Home, Inc.

(Name of Corporation)

By

Robert E. Mason

Title President/Secretary

(Report must be signed by an officer)

Filing Fee \$15.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 0012203 Annual Report for the year 1990

FIRST: The name of the corporation is Smith-Mason Funeral Home, Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is Funeral Directing and Associated Practices

FOURTH: If foreign corporation, address of its principal office n/a

FIFTH: Business address in Rhode Island 398 Willett Avenue P.O. Box 4517
Riverside, R.I. 02915

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
	Director	
	Director	
	Director	
<u>Robert E. Mason</u>	President	<u>6 Ledge Road Barrington, R.I. 02806</u>
<u>May Z. Smith</u>	Vice President	<u>15 Hanson Road Barrington, R.I. 02806</u>
<u>Robert E. Mason</u>	Secretary	<u>6 Ledge Road Barrington, R.I. 02806</u>
<u>Charles A. Mason</u>	Treasurer	<u>38 Monmouth Drive Riverside, R.I. 02915</u>

SEVENTH: Number of Shares authorized:

No. of Shares	Class
<u>350</u>	<u>Preferred</u>
<u>500</u>	<u>Common</u>

PAID
FEB 08 1990
SECY. OF STATE

Par Value
or statement that
shares are without
par value
\$300.00
NPV

EIGHTH: Number of Shares issued:

No. of Shares	Class
<u>350</u>	<u>Preferred</u>
<u>345</u>	<u>Common</u>

Par Value
or statement that
shares are without
par value
\$300.00
NPV

Dated February 6, 19 90.

Smith-Mason Funeral Home, Inc.
(Name of Corporation)

By [Signature]
President/Secretary

Title _____

(Report must be signed by an officer)

Filing Fee \$15.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

SOS

Corporate ID 0012203 Annual Report for the year 1989

FIRST: The name of the corporation is Smith-Mason Funeral Home, Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is Funeral Directing and
associated practices

FOURTH: If foreign corporation, address of its principal office n/a

FIFTH: Business address in Rhode Island 398 Willett Avenue P.O. Box 4517
Riverside, R.I. 02915

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
.....	Director
.....	Director
.....	Director
Robert E. Mason	President	6 Ledge Road Barrington, R.I. 02806
May Z. Smith	Vice President	15 Hanson Road Barrington, R.I. 02806
Robert E. Mason	Secretary	6 Ledge Road Barrington, R.I. 02806
Charles A. Mason	Treasurer	38 Monmouth Drive Riverside, R.I. 02915

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
350	Preferred		\$300.00
500	Common		NPV

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
350	Preferred		\$300.00
345	Common		NPV

PAID
FEB 17 1989

Dated February 15, 1989 19

Smith-Mason Funeral Home, Inc.
(Name of Corporation)

By Robert E. Mason

Title President/Secretary

(Report must be signed by an officer)

Filing Fee \$15.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 12203 Annual Report for the year 1988

FIRST: The name of the corporation is Smith-Mason Funeral Home, Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is Funeral Home

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island

398 Willette Avenue East Providence, R I 02915

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name

Office

Address (including number, street, zip code)

Director

Director

Director

Robert E. Mason

President

6 Ledge Road Barrington, R I 02806

May Z. Smith

Vice President

15 Hanson Road Barrington, R I 02806

Robert E. Mason

Secretary

6 Ledge Road Barrington, R I 02806

Charles A. Mason

Treasurer

38 Monmouth Drive East Providence, R I 02915

SEVENTH: Number of Shares authorized:

No. of Shares

Class

500

Common

Par Value
or statement that
shares are without
par value

None

PAID Series

MAR 07 1988

SECY OF STATE

EIGHTH: Number of Shares issued:

No. of Shares

Class

345

Common

Par Value
or statement that
shares are without
par value

None

Dated February 20 19 88

Smith-Mason Funeral Home Inc.

(Name of Corporation)

By

Charles A. Mason

Title Treasurer

(Report must be signed by an officer)

Filing Fee \$15.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 12203 Annual Report for the year 1987

FIRST: The name of the corporation is Smith-Mason Funeral Home, Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is Funeral Home

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island

398 Willett Avenue Riverside, R I 02915

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
	Director	
	Director	
	Director	
Robert E. Mason	President	6 Ledge Road Barrington, R I 02806
May Z. Smith	Vice President	15 Hanson Road Barrington, R I 02806
Robert E. Mason	Secretary	6 Ledge Road Barrington, R I 02806
Charles A. Mason	Treasurer	38 Monmouth Drive Riverside, R I 02915

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series
500	Common	

Par Value
or statement that
shares are without
par value

None

EIGHTH: Number of Shares issued:

No. of Shares	Class
345	Common

Par Value
or statement that
shares are without
par value

None

Dated February 26 19 87

Smith-Mason Funeral Home, Inc.
(Name of Corporation)

By Charles A. Mason

Title Treasurer

(Report must be signed by an officer)

Filing Fee \$15.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 12203 Annual Report for the year 1986

FIRST: The name of the corporation is Smith-Mason Funeral Home, Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is Funeral Directing and
associated practices

FOURTH: If foreign corporation, address of its principal office. n/a

FIFTH: Business address in Rhode Island 398 Willett Avenue P.O. Box 4517
Riverside, R.I. 02915

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
	Director	
	Director	
	Director	
<u>Robert E. Mason</u>	<u>President</u>	<u>6 Ledge Road Barrington, R.I. 02806</u>
<u>May Z. Smith</u>	<u>Vice President</u>	<u>15 Hanson Road Barrington, R.I. 02806</u>
<u>Robert E. Mason</u>	<u>Secretary</u>	<u>6 Ledge Road Barrington, R.I. 02806</u>
<u>Charles A. Mason</u>	<u>Treasurer</u>	<u>38 Monmouth Drive Riverside, R.I. 02915</u>

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
<u>350</u>	<u>Preferred</u>		<u>\$300.00</u>
<u>500</u>	<u>Common</u>		<u>NPV</u>

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
<u>350</u>	<u>Preferred</u>		<u>\$300.00</u>
<u>350</u>	<u>Common</u>		<u>NPV</u>

Dated February 19, 1986 19 Smith-Mason Funeral Home, Inc.
(Name of Corporation)

By Robert E. Mason

Title President-Secretary

(Report must be signed by an officer)

Filing fee: \$15.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations
OFFICE OF THE SECRETARY OF STATE

Annual Report for the year 1985

FIRST: The name of the corporation is Smith-Mason Funeral Home Inc.

ID # 12203

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is

Funeral Service

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island (blank reports will be mailed to this address) 398 Willett Avenue Riverside, R.I. 02915

SIXTH: Names and addresses of its directors and officers:

(Addresses must include street and number, if any)

Name	Office	Address
	Director	
	Director	
	Director	
Robert E. Mason	President	6 Ledge Rd. Barrington, R.I. 02806
May Z. Smith	Vice President	15 Hanson Rd. Barrington, R.I. 02806
Robert E. Mason	Secretary	6 Ledge Rd. Barrington, R.I. 02806
Charles A. Mason	Treasurer	38 Monmouth Drive Riverside, R.I. 02915

(If additional space is needed, attach rider)

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
500	Common		None

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
350	Common		None

Dated: January 18 19 85

Smith-Mason Funeral Home Inc.

(Name of Corporation)

By Charles A. Mason

Title Treasurer

(Report must be signed by an officer)

If the corporation has changed its registered office and/or its registered agent,
Form #9 must be filed. Please contact Corporation Division for information. 277-3040

Filing fee: \$15.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations
OFFICE OF THE SECRETARY OF STATE

Annual Report for the year 1984

FIRST: The name of the corporation is Smith-Mason Funeral Home Inc.

ID # 12203

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is

Funeral Service

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island (blank reports will be mailed to this address) 398 Willett Avenue Riverside, R. I. 02915

SIXTH: Names and addresses of its directors and officers:

(Addresses must include street and number, if any)

Name	Office	Address
	Director	
	Director	
	Director	
Robert E. Mason	President	6 Ledge Rd. Barrington, R.I. 02806
May Z. Smith	Vice President	15 Hanson Rd. Barrington, R.I. 02806
Robert E. Mason	Secretary	6 Ledge Rd. Barrington, R.I. 02806
Charles A. Mason	Treasurer	38 Monmouth Dr. Riverside, R.I. 02915

(If additional space is needed, attach rider)

SEVENTH: Number of Shares authorized:

No. of Shares
500

Class
common

Series

Par Value
or statement that
shares are without
par value
none

EIGHTH: Number of Shares issued:

No. of Shares
350

Class
common

Series

Par Value
or statement that
shares are without
par value
none

Dated: Jan. 18

61/21/85

PAID

15.00
15.00
0229011

Smith-Mason Funeral Home Inc.

(Name of Corporation)

By

Charles A. Mason

Title

Treasurer

(Report must be signed by an officer)

If the corporation has changed its registered office and/or its registered agent,
Form #9 must be filed. Please contact Corporation Division for information. 277-3040

Filing fee: \$15.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations
OFFICE OF THE SECRETARY OF STATE

Annual Report for the year 1982

FIRST: The name of the corporation is

ROYCE R. SMITH FUNERAL HOME, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is Funeral Directing
and associated practices

FOURTH: If foreign corporation, address of its principal office n/a

FIFTH: Business address in Rhode Island (blank reports will be mailed to this
address) 398 Willett Avenue P.O. Box 4517 Riverside, R.I. 02915

SIXTH: Names and addresses of its directors and officers:

(Addresses must include street and number, if any)

Name	Office	Address
	Director	
	Director	
Royce R. Smith	Director	Hanson Road Barrington, R.I. 02806
Robert E. Mason	President	6 Ledge Road Barrington, R.I. 02806
May Z. Smith	Vice President	Hanson Road Barrington, R.I. 02806
Robert E. Mason	Secretary	6 Ledge Road Barrington, R.I. 02806
Charles A. Mason	Treasurer	38 Monmouth Drive P.O. Box 4518 Riverside, R.I. 02915

(If additional space is needed, attach rider)

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
350	Preferred		\$300.00
500	Common		NPV

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
350	Preferred	2	\$300.00
350	Common	13	NPV
		63	

Dated: February 16, 1983

Royce R. Smith Funeral Home Inc.

(Name of Corporation)

By [Signature]

Title President-Secretary

(Report must be signed by an officer)

If the corporation has changed its registered office and/or its registered agent,
Form #9 must be filed. Please contact Corporation Division for information. 277-3040

Filing fee: \$15.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations
OFFICE OF THE SECRETARY OF STATE

Annual Report for the year 1981 / 1982

FIRST: The name of the corporation is Royce R. Smith Funeral Home, Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is Funeral Directing

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island (blank reports will be mailed to this address) 398 Willett Avenue P.O. Box 4517 Riverside, R.I. 02915

SIXTH: Names and addresses of its directors and officers:

(Addresses must include street and number, if any)

Name	Office	Address
	Director	
	Director	
Royce R. Smith	Director	Hanson Road Barrington, R.I. 02806
Robert E. Mason	President	6 Ledge Road Barrington, R.I. 02806
May Z. Smith	Vice President	Hanson Road Barrington, R.I. 02806
Robert E. Mason	Secretary	6 Ledge Road Barrington, R.I.
Charles A. Mason	Treasurer	38 Monmouth Road Riverside, R.I. 02915

(If additional space is needed, attach rider)

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
350	Preferred		\$300.00
500	Common		N.P.V.

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
350	Preferred	1	\$300.00
350	Common	1	N.P.V.

Dated: January 5, 19 82

Royce R. Smith Funeral Home Inc.
(Name of Corporation)

By Robert E. Mason

Title President-Secretary

(Report must be signed by an officer)

If the corporation has changed its registered office and/or its registered agent,
Form #9 must be filed. Please contact Corporation Division for information. 277-3040

Filing fee: \$15.00

To be filed annually
between January 1st and March 1st

State of Rhode Island and Providence Plantations
OFFICE OF THE SECRETARY OF STATE

ANNUAL REPORT
OF

Royce R. Smith Funeral Home Inc.

Pursuant to the provisions of Section 7.1.1-118 of the General Laws, 1956, as amended, the undersigned corporation hereby submits the following annual report:

FIRST: The name of the corporation is Royce R. Smith Funeral Home Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: The address of its registered office in Rhode Island is
John H. Reid III

and the name of its registered agent in Rhode Island at such address is
398 Willett Avenue Riverside, R.I. 02915

FOURTH: If a foreign corporation, the address of its principal office in the state or country under the laws of which it is incorporated is

FIFTH: The character of the business in which it is actually engaged in Rhode Island, briefly stated, is Funeral Business

SIXTH: The names and respective addresses of its directors and officers are:

Name	Office	Address
	Director	
	Director	
	Director	
	Director	
	Director	
Royce R. Smith	Director	Hanson Road Barrington, R.I. 02806
Robert E. Mason	President	6 Ledge Road Barrington, R.I. 02806
May Z. Smith	Vice President	Hanson Road Barrington, R.I. 02806
Robert E. Mason	Secretary	6 Ledge Road Barrington, R.I. 02806
Charles A. Mason	Treasurer	38 Monmouth Dr. Riverside, R.I. 02915

SEVENTH: The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class	Series	Par Value per Share or Statement that Shares are without Par Value
350	Preferred	2	\$300.00
500	Common	6	N.P.V.

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6498A14.....1500BL

FEB 17 1987
p/sa

EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

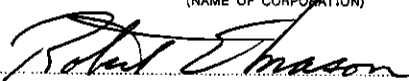
<u>Number of Shares</u>	<u>Class</u>	<u>Series</u>	<u>Par Value per Share or Statement that Shares are without Par Value</u>
350	Preferred		\$300.00
350	Common		N.P.V.

Dated February 4, 19 81

Royce R. Smith Funeral Home Inc.

(NAME OF CORPORATION)

By



Its Secretary

Filing fee: \$15.00

To be filed annually
between January 1st and March 1st

State of Rhode Island and Providence Plantations
OFFICE OF THE SECRETARY OF STATE
ANNUAL REPORT
OF

Royce R. Smith Funeral Home Inc.

Pursuant to the provisions of Section 7.1.1-118 of the General Laws, 1956, as amended, the undersigned corporation hereby submits the following annual report:

FIRST: The name of the corporation is ROYCE R. SMITH FUNERAL HOME
INCORPORATED

SECOND: It is incorporated under the laws of Rhode Island

THIRD: The address of its registered office in Rhode Island is 398 Willett
Avenue Riverside, R.I.

and the name of its registered agent in Rhode Island at such address is
John H. Reid III

FOURTH: If a foreign corporation, the address of its principal office in the state or country under the laws of which it is incorporated is

FIFTH: The character of the business in which it is actually engaged in Rhode Island, briefly stated, is Funeral Business

SIXTH: The names and respective addresses of its directors and officers are:

Name	Office	Address
	Director	
	Director	
	Director	
	Director	
	Director	
Royce R. Smith	Director	3 Tall Pines Dr. Barrington, R.I.
Robert E. Mason	President	6 Ledge Road Barrington, R.I.
May Z. Smith	Vice President	3 Tall Pines Dr. Barrington, R.I.
Robert E. Mason	Secretary	6 Ledge Road Barrington, R.I.
Charles A. Mason	Treasurer	38 Monmouth Dr. Riverside, R.I.

SEVENTH: The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class	1 Series	Par Value per Share or Statement that Shares are without Par Value
350	Preferred		\$300.00
500	Common		N.P.V.

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EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

<u>Number of Shares</u>	<u>Class</u>	<u>Series</u>	<u>Par Value per Share or Statement that Shares are without Par Value</u>
350	Prefered		\$300.00
350	Common		N.P.V.

Dated January 10, 1980 Royce R. Smith Funeral Home Inc.
(NAME OF CORPORATION)
By Robert E. Mason
Its President

To be filed annually
between January 1st and March 1st

Royce R. Smith Funeral Home Inc.

FIRST: The name of the corporation is Royce R. Smith Funeral Home Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: The address of its registered office in Rhode Island is:

398 Willett Avenue Riverside, R.I. 02915

and the name of its registered agent in Rhode Island at such address is.

George A. Saxon

FOURTH: If a foreign corporation, the address of its principal office in the state or country under the laws of which it is incorporated is _____

FIFTH: The character of the business in which it is actually engaged in Rhode Island, briefly stated, is Funeral Directing and related business

SIXTH: The names and respective addresses of its directors and officers are:

Name	Office	Address
Royce R. Smith	Director	3 Tall Pines Drive Barrington, R.I. 0280
	Director	
	Director	
	Director	
	Director	
	Director	
Robert E. Mason	President	6 Ledge Road Barr. R.I. 02806
May Z. Smith	Vice President	3 Tall Pines Rd. Barr., R.I. 02806
Robert E. Mason	Secretary	6 Ledge Road Barr., R.I. 02806
Charles A. Mason	Treasurer	38 Monmouth Dr. Riverside, R.I. 02915

SEVENTH: The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

<u>Number of Shares</u>	<u>Class</u>	<u>Series</u>	<u>Par Value per Share or Statement that Shares are without Par Value</u>
500	Common	79	no par value
350	Preferred	. .	\$300.00 Par Value

Par Value per Share
or Statement that
Shares are without
Par Value

series	
1915.00
2015.00
2115.00
2215.00
2315.00
2415.00
2515.00
2615.00
2715.00
2815.00
2915.00
3015.00
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4215.00
4315.00
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4815.00
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8915.00
9015.00
9115.00
9215.00
9315.00
9415.00
9515.00
9615.00
9715.00
9815.00
9915.00
10015.00

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EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

<u>Number of Shares</u>	<u>Class</u>	<u>Series</u>	<u>Par Value per Share or Statement that Shares are without Par Value</u>
350	Common		No Par Value
350	Preferred		\$300.00

Dated February 28, 19 79 Royce R. Smith Funeral Home Inc.

(NAME OF CORPORATION)

By Robert E. Mason

Its Secretary

Filing fee: \$15.00

To be filed annually
between January 1st and March 1st

State of Rhode Island and Providence Plantations
OFFICE OF THE SECRETARY OF STATE
ANNUAL REPORT
OF

ROYCE R. SMITH FUNERAL HOME, INC.

Pursuant to the provisions of Section 7.1.1-118 of the General Laws, 1956, as amended, the undersigned corporation hereby submits the following annual report:

FIRST: The name of the corporation is Royce R. Smith Funeral
Home, Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: The address of its registered office in Rhode Island is
398 Willett Avenue, Riverside, R. I.

and the name of its registered agent in Rhode Island at such address is
George A. Saxon

FOURTH: If a foreign corporation, the address of its principal office in the state or country under the laws of which it is incorporated is

FIFTH: The character of the business in which it is actually engaged in Rhode Island, briefly stated, is Funeral Home

SIXTH: The names and respective addresses of its directors and officers are:

Name	Office	Address
Royce R. Smith	Director	3 Tall Pines Dr. Barrington, R. I.
May Z. Smith	Director	3 Tall Pines Dr. Barrington, R. I.
Charles A. Mason	Director	38 Monmouth Dr. Riverside, R. I.
Robert E. Mason	Director	6 Ledge Road Barrington, R. I.
	Director	
	Director	
Royce R. Smith	President	3 Tall Pines Dr. Barrington, R. I.
Charles A. Mason	Vice President	38 Monmouth Dr. Riverside, R. I.
Robert E. Mason	Secretary	6 Ledge Road Barrington, R. I.
May Z. Smith	Treasurer	3 Tall Pines Dr. Barrington, R. I.

SEVENTH: The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class	Series	Par Value per Share or Statement that Shares are without Par Value
350	Preferred	- - -	\$ 300.00
500	Common	- - -	NPV

FEB 21 1978

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EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

<u>Number of Shares</u>	<u>Class</u>	<u>Series</u>	<u>Par Value per Share or Statement that Shares are without Par Value</u>
350	Preferred	- - -	\$ 300.00
350	Common	- - -	NPV

Dated February 15, 1978

ROYCE R. SMITH FUNERAL HOME, INC.

(NAME OF CORPORATION)

By

Royce R. Smith

Its President

State of Rhode Island and Providence Plantations
OFFICE OF THE SECRETARY OF STATE

**ANNUAL REPORT
OF**

ROYCE R. SMITH FUNERAL HOME, INC.

Pursuant to the provisions of Section 7.1.1-118 of the General Laws, 1956, as amended, the undersigned corporation hereby submits the following annual report:

FIRST: The name of the corporation is Royce R. Smith Funeral Home, Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: The address of its registered office in Rhode Island is 398 Willett Avenue, Riverside, Rhode Island
and the name of its registered agent in Rhode Island at such address is George A. Saxon

FOURTH: If a foreign corporation, the address of its principal office in the state or country under the laws of which it is incorporated is _____

FIFTH: The character of the business in which it is actually engaged in Rhode Island, briefly stated, is funeral home

SIXTH: The names and respective addresses of its directors and officers are:

Name	Office	Address
Royce R. Smith	Director	111 Hillside Ave., Rehoboth, Mass.
May Z. Smith	Director	111 Hillside Ave., Rehoboth, Mass.
	Director	
	Director	
	Director	
	Director	
Royce R. Smith	President	111 Hillside Ave., Rehoboth, Mass.
May Z. Smith	Vice President	111 Hillside Ave., Rehoboth, Mass.
May Z. Smith	Secretary	111 Hillside Ave., Rehoboth, Mass.
Royce R. Smith	Treasurer	111 Hillside Ave., Rehoboth, Mass.

SEVENTH: The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class	Series	Par Value per Share or Statement that Shares are without Par Value
350	preferred	---	\$300.00
500	common	---	NPV

EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

<u>Number of Shares</u>	<u>Class</u>	<u>Series</u>	<u>Par Value per Share or Statement that Shares are without Par Value</u>
350	preferred	---	\$ 300.00
350	common	---	NPV

Dated Feb. 24, 19 77

ROYCE R. SMITH FUNERAL HOME, INC.
(NAME OF CORPORATION)

By Royce R. Smith
Its President

Filing fee: \$15.00

To be filed annually
between January 1st and March 1st

State of Rhode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

ANNUAL REPORT

OF

ROYCE R. SMITH FUNERAL HOME, INC.

Pursuant to the provisions of Section 7-1.1-118 of the General Laws, 1956, as amended, the undersigned corporation hereby submits the following annual report:

FIRST: The name of the corporation is

ROYCE R. SMITH FUNERAL HOME, INC.

SECOND: It is incorporated under the laws of

THIRD: The address of its registered office in Rhode Island is

398 Willett Avenue, Riverside, R. I.

and the name of its registered agent in Rhode Island at such address is

SAME

FOURTH: If a foreign corporation, the address of its principal office in the state or country under the laws of which it is incorporated is

FIFTH: The character of the business in which it is actually engaged in Rhode Island, briefly stated, is FUNERAL HOME

SIXTH: The names and respective addresses of its directors and officers are:

Name	Office	Address
<u>Royce R. Smith</u>	<u>Director</u>	<u>111 Hillside Ave, Rehoboth, Mass.</u>
<u>May Z. Smith</u>	<u>Director</u>	<u>111 Hillside Ave, Rehoboth, Mass.</u>
	<u>Director</u>	
	<u>Director</u>	
	<u>Director</u>	
<u>Royce R. Smith</u>	<u>President</u>	<u>111 Hillside Ave, Rehoboth, Mass.</u>
<u>May Z. Smith</u>	<u>Vice President</u>	<u>111 Hillside Ave, Rehoboth, Mass.</u>
<u>May Z. Smith</u>	<u>Secretary</u>	<u>111 Hillside Ave, Rehoboth, Mass.</u>
<u>Royce R. Smith</u>	<u>Treasurer</u>	<u>111 Hillside Ave, Rehoboth, Mass.</u>

SEVENTH: The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class	Series	Par Value per Share or Statement that Shares are without Par Value
500	No Par Common		NPV

JAN 28 1976

EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

<u>Number of Shares</u>	<u>Class</u>	<u>Series</u>	<u>Par Value per Share or Statement that Shares are without Par Value</u>
350	No Par Common		NPV

Dated Jan. 27, 1976

Roger R. Smith Fumess House, Inc.
(NAME OF CORPORATION)

By Roger R. Smith
Its President

APR 12-76 SEC. OF STATE 0074 11:44 *15.00

Filing fee: \$15.00

To be filed annually
between January 1st and March 1st

State of Rhode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

ANNUAL REPORT

OF

ROYCE R. SMITH FUNERAL HOME, INC.

Pursuant to the provisions of Section 7-1.1-118 of the General Laws, 1956, as amended, the undersigned corporation hereby submits the following annual report:

FIRST: The name of the corporation is

ROYCE R. SMITH FUNERAL HOME, INC.

SECOND: It is incorporated under the laws of

THIRD: The address of its registered office in Rhode Island is

398 Willett Avenue, Riverside, R. I.

and the name of its registered agent in Rhode Island at such address is

SAME

FOURTH: If a foreign corporation, the address of its principal office in the state or country under the laws of which it is incorporated is

FIFTH: The character of the business in which it is actually engaged in Rhode Island, briefly stated, is FUNERAL HOME

SIXTH: The names and respective addresses of its directors and officers are:

Name	Office	Address
Royce R. Smith	Director	111 Hillside Ave, Rehoboth, Mass.
May Z. Smith	Director	111 Hillside Ave, Rehoboth, Mass.
	Director	
	Director	
	Director	
	Director	
Royce R. Smith	President	111 Hillside Ave, Rehoboth, Mass.
May Z. Smith	Vice President	111 Hillside Ave, Rehoboth, Mass.
May Z. Smith	Secretary	111 Hillside Ave, Rehoboth, Mass.
Royce R. Smith	Treasurer	111 Hillside Ave, Rehoboth, Mass.

SEVENTH: The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class	Series	Par Value per Share or Statement that Shares are without Par Value
500	No Par Common		NPV

JAN 24 1975

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EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

<u>Number of Shares</u>	<u>Class</u>	<u>Series</u>	<u>Par Value per Share or Statement that Shares are without Par Value</u>
350	No Par Common		NPV

Dated Jan. 20, 1975 Royce R. Smith Funeral Home, Inc.
(NAME OF CORPORATION)
By Royce R. Smith
Its President

EB 24-75 SEC-OF STATE 7079 AR*****15.00

Filing fee: \$15.00

To be filed annually
between January 1st and March 1st

State of Rhode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

ANNUAL REPORT

OF

ROYCE R. SMITH FUNERAL HOME, INC.

Pursuant to the provisions of Section 7-1.1-118 of the General Laws, 1956, as amended, the undersigned corporation hereby submits the following annual report:

FIRST: The name of the corporation is

ROYCE R. SMITH FUNERAL HOME, INC.

SECOND: It is incorporated under the laws of

THIRD: The address of its registered office in Rhode Island is

398 Willett Avenue, Riverside, R. I. 02915

and the name of its registered agent in Rhode Island at such address is

SAME

FOURTH: If a foreign corporation, the address of its principal office in the state or country under the laws of which it is incorporated is

FIFTH: The character of the business in which it is actually engaged in Rhode Island, briefly stated, is

FUNERAL HOME

SIXTH: The names and respective addresses of its directors and officers are:

Name	Office	Address
Royce R. Smith	Director	8 Fireside Drive, Barrington, R.I.
May Z. Smith	Director	8 Fireside Drive, Barrington, R.I.
	Director	
	Director	
	Director	
	Director	
Royce R. Smith	President	8 Fireside Drive, Barrington, R.I.
May Z. Smith	Vice President	8 Fireside Drive, Barrington, R.I.
May Z. Smith	Secretary	8 Fireside Drive, Barrington, R.I.
Royce R. Smith	Treasurer	8 Fireside Drive, Barrington, R.I.

SEVENTH: The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class	Series	Par Value per Share or Statement that Shares are without Par Value
500	No Par Common		NPV

MAR 29 1974

EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

<u>Number of Shares</u>	<u>Class</u>	<u>Series</u>	<u>Par Value per Share or Statement that Shares are without Par Value</u>
350	No Par Common		NPV

Dated March 28, 1974

Royce R. Smith Funeral Home, Inc.
(NAME OF CORPORATION)

By Royce R. Smith
Its President

APR -2-74 SEC-OF STATE 1198 AR*****15.00

Filing fee: \$15.00

To be filed annually
between January 1st and March 1st

State of Rhode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

ANNUAL REPORT

OF

ROYCE R. SMITH FUNERAL HOME, INC.

Pursuant to the provisions of Section 7-1.1-118 of the General Laws, 1956, as amended, the undersigned corporation hereby submits the following annual report:

FIRST: The name of the corporation is
ROYCE R. SMITH FUNERAL HOME, INC.

SECOND: It is incorporated under the laws of RHODE ISLAND

THIRD: The address of its registered office in Rhode Island is
398 Willett Avenue, Riverside, R. I. 02915
and the name of its registered agent in Rhode Island at such address is
SAME

FOURTH: If a foreign corporation, the address of its principal office in the state or country under the laws of which it is incorporated is

FIFTH: The character of the business in which it is actually engaged in Rhode Island, briefly stated, is FUNERAL HOME

SIXTH: The names and respective addresses of its directors and officers are:

Name	Office	Address
Royce R. Smith	Director	8 Fireside Drive, Barrington, R.I.
May Z. Smith	Director	8 Fireside Drive, Barrington, R.I.
	Director	
	Director	
	Director	
	Director	
Royce R. Smith	President	8 Fireside Drive, Barrington, R.I.
May Z. Smith	Vice President	8 Fireside Drive, Barrington, R.I.
May Z. Smith	Secretary	8 Fireside Drive, Barrington, R.I.
Royce R. Smith	Treasurer	8 Fireside Drive, Barrington, R.I.

SEVENTH: The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class	Series	Par Value per Share or Statement that Shares are without Par Value
500	No Par Common		NPV

EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

<u>Number of Shares</u>	<u>Class</u>	<u>Series</u>	<u>Par Value per Share or Statement that Shares are without Par Value</u>
350	No Par Common		NPV

Dated February 12, 1974

Royce R. Smith Funeral Home, Inc.
(NAME OF CORPORATION)

By Royce R. Smith
Its President

APR -2-74 SEC-OF STATE 1197 AIR*****15.00