



State of Rhode Island and Providence Plantations  
**Department of State - Business Services Division**

Annual Report for the year: **2005**

Non-Profit Corporation

- Filing period: June 1 - June 30
- Filing Fee: \$20.00
- Penalty: Additional \$25.00 fee if form is not filed by July 30.

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 BUS SVCS DIV

2017 MAR 24 AM 10:42

1. Entity ID Number <b>28690</b>		2. Exact name of the Corporation <b>Moslem Grotto M.O.V.P.E.R. Inc</b>			
3. State of Incorporation <b>Rhode Island</b>		4. Brief description of the character of business conducted in Rhode Island <b>Non profit fraternal organization</b>			
5. Principal Office Address <b>142 Woodhaven Road</b>		City <b>Woonsocket</b>	State <b>Rhode Island</b>	Zip <b>02895</b>	
6. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name <b>Andre L. Gergoire</b>		Vice-President Name <b>Henry M. Albers</b>			
Street Address <b>392 West Wrentham Rad</b>		Street Address <b>70 Pearl Avenue</b>			
City <b>Cumberland</b>	State <b>RI</b>	Zip <b>02864</b>	City <b>Rumford</b>	State <b>RI</b>	Zip <b>02916</b>
Secretary Name <b>Douglas E. Connell</b>		Treasurer Name <b>Douglas E. Connell</b>			
Street Address <b>142 Woodhaven Road</b>		Street Address <b>142 Woodhaven Road</b>			
City <b>Woonsocket</b>	State <b>RI</b>	Zip <b>02895</b>	City <b>Woonsocket</b>	State <b>RI</b>	Zip <b>02895</b>
7. List ALL directors (names and addresses). RI Corporations <b>MUST</b> list at least <b>THREE</b> directors. <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name <b>Jerry I Duhamel Sr.</b>		Director Name <b>Robert M. Chase</b>			
Street Address <b>5 Crystal Court</b>		Street Address <b>119 Lexington Avenue</b>			
City <b>Charlestown</b>	State <b>RI</b>	Zip <b>02813</b>	City <b>Providence</b>	State <b>RI</b>	Zip <b>02907</b>
Director Name <b>Everett F. Hopkins</b>		Director Name <b>None</b>			
Street Address <b>17 Amanda Street</b>		Street Address			
City <b>Cranston</b>	State <b>RI</b>	Zip <b>02920</b>	City	State	Zip
8. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641.					
<b>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.</b>					
<small>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.</small>					
Name of Officer/Authorized Representative <b>Douglas E. Connell</b>				Date <b>03/22/2017</b>	
Signature of Officer/Authorized Representative 				<b>FILED</b> 11:00 AM MAR 24 2017 BY <u>299089</u> KM	

MAIL TO:  
 Division of Business Services  
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