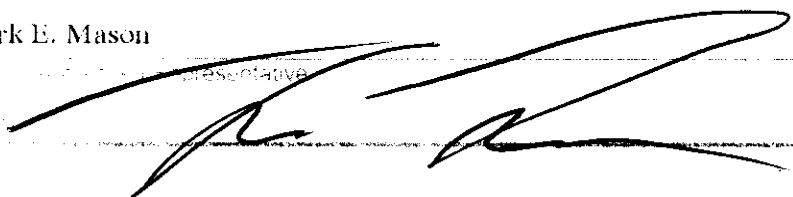


Annual Report for the year: 2017

Corporation

- Filing period: January 1 - March 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by April 1

1 Filing Number 000012203		2 Exact name of the Corporation Smith-Mason Funeral Home Inc.			
3 Principal Office Address 398 Willett Avenue		City East Providence		State RI	Zip 02915
4 Telephone Number 401-433-2300		5 State of Incorporation RI			
6 Name of business conducted in Rhode Island Funeral Service					
7 Name and address of Vice-President Robert E. Mason 398 Willett Avenue East Providence RI 02915		8 Vice-President Name Robert E. Mason Street Address 398 Willett Avenue City East Providence State RI Zip 02915			
9 Name and address of Treasurer Mark E. Mason 398 Willett Avenue East Providence RI 02915		10 Treasurer Name Robert E. Mason Street Address 398 Willett Avenue City East Providence State RI Zip 02915			
11 Name and address of Director Robert E. Mason 398 Willett Avenue East Providence RI 02915		12 Director Name Shannon McArthur Street Address 398 Willett Avenue City East Providence State RI Zip 02915			
13 Name and address of Secretary Robert E. Mason 398 Willett Avenue East Providence RI 02915		14 Secretary Name Shannon McArthur Street Address 398 Willett Avenue City East Providence State RI Zip 02915			
15 Name and address of Agent for Service of Process Robert E. Mason 398 Willett Avenue East Providence RI 02915		16 Agent for Service of Process Name Shannon McArthur Street Address 398 Willett Avenue City East Providence State RI Zip 02915			
17 Name and address of Agent for Acceptance of Service of Process Robert E. Mason 398 Willett Avenue East Providence RI 02915		18 Agent for Acceptance of Service of Process Name Shannon McArthur Street Address 398 Willett Avenue City East Providence State RI Zip 02915			
19 Name and address of Agent for Acceptance of Service of Process Robert E. Mason 398 Willett Avenue East Providence RI 02915		20 Shares Issued 350			
21 Name and address of Agent for Acceptance of Service of Process Robert E. Mason 398 Willett Avenue East Providence RI 02915		22 Total Assets \$300000.00			
23 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.					
24 Name of Representative Mark E. Mason		25 Date 3/22/2017			



FILED
MAR 27 2017
BY 10607