RI SOS Filing Number: 201748099350 Date: 7/31/2017 4:00:00 PM

(FR)

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: 2017 **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.

			<u></u>				
1. Entity ID Number	2. Exact name	of the Corporation	n				
30199	Touro Fratern	nal Association					
3. State of Incorporation	5. Brief descrip	5. Brief description of the character of business conducted in Rhode Island					
Rhode Island		Fraternal Association					
4. NAICS Code	1						
813990 - Other Similar Organiza							
6. Principal Office Address			City	State	Zip		
45 Rolfe Square			Cranston	RI	02910		
7. List ALL officers (names and add	dresses)		Check th	e box to indicate a	n attachment		
President Name Jed Brandes			Vice-President Name Alan Lury		<u> </u>		
Street Address 75 Julia Street			Street Address 15 Lakeview Street	Street Address 15 Lakeview Street			
City Cranston	State RI	Zip 02910	City Sharon	State MA	^{Zip} 02067		
Secretary Name Bruce Wasser			Treasurer Name Steven Waldman				
Street Address 121 Nanci Karen Drive		Street Address 51 Stadium Road	<u> </u>				
City Warwick	State RI	^{Zip} 02886	City Providence	State RI	Zip 02906		
8. List ALL directors (names and ac	idresses). RI Соп	porations MUST I		ck the box to indicate	an attachment 🗸		
Director Name Jed Brandes			Director Name Alan Lury	Director Name Alan Lury			
Street Address 75 Julia Street				Street Address 15 Lakeview Street			
City Cranston	State RI	^{Zip} 02910	City Sharon	State MA	^{Zip} 02067		
Director Name Bruce Weisman			Director Name Barry Schiff	Director Name Barry Schiff			
Street Address 270 Boulder View Dr.		Street Address 68 Mauran Street	Street Address 68 Mauran Street				
City Warwick	State RI	Zip 02886	City Cranston	State RI	^{Zip} 02910		
			d in the Department of State. Changes requ				
	e and affirm that	t I have examined	d this report, including any accomp		s and		
This report must be signed by either the Presid	ident, Vice-President, S		ecretary, Treasurer, duly Authorized Representation	ve, Receiver or Trustee.			
Name of Officer/Authorized Represe				Date			
Jed R. Brandes				July 26, 2017			
Senatury of Officer/Anthorized Repr	esentative		F	ILED	√ ` \		

MAIK TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov JUL 3 1 2017

FORM 631 - Revised: 06/2017

Name	ciation - Additional Board Members 20	City	State	Zip
Jeffrey Davis	101 River Farms Drive	West Warwick	RI	02893
Michael Smith	26 Sandro Drive	Warwick	RI	02886
Nathan Lury	622 Pocasset Court	Warwick	- RI	
Norman Dinerman	18 Road B	Scituate		02886
Ried Redlich	20 Wollen Drive	Cumberland	RI	02857
Robert Miller	16 Caverly Street	Warwick	RI	02864
Stevan Labush	101 Kennedy Drive	Warwick	RI	02886
Steven White	53 Glenwood Avenue		RI	02889
Richard Levenson	15 Elmbrook Drive	Pawtucket	RI	02860
Andrew Gilstein	49 Timberline Road	Warwick	RI	02886
Andrew Lamchick	27 Ponderosa Drive	Warwick	RI	02886
Michael Levin		West Warwick	Ri	02893
	21 Marshall Road	Cranston	RI	02920
Andrew Liss	953 Jefferson Blvd., Ste 2000	Warwick	RI	02886
Arthur Poulten	26 Arlington Road	Burlington	MA	01803
Steven Waldman	51 Stadium Road	Providence	RI	02906
Max Guarino	181 W Forest Avenue	Pawtucket	RI	
Barry Ackerman	6 Shelter Lane	Cumberland	RI	02860 02864

FILED

JUL 3 1 2017