



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

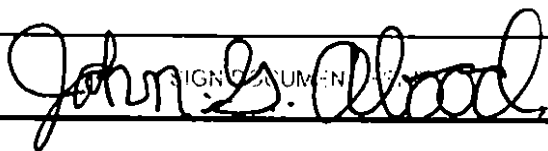
Annual Report for the year: 2018
Corporation

→ Filing period: January 1 - March 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by April 1.

RECEIVED
SECRETARY OF STATE
CORPORATIONS DIV.
2018 FEB 23 AM 11:11
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1. Entity ID Number 7575		2. Exact name of the Corporation ST. ANTHONY CLUB, INC.			
3. Principal Office Address 101 GLOVER STREET		City PROVIDENCE		State RI	Zip 02908
4. NAICS Code 813110		6. Brief description of the character of business conducted in Rhode Island OWNING, OPERATING, MAINTAINING AND MANAGING A BUILDING TO BE USED BY ST. ANTHONY COUNCIL NO. 1618, KNIGHTS OF COLUMBUS AND ANYTHING ALLIED THERETO.			
5. State of Incorporation RHODE ISLAND					
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐					
President Name JOHN G. ABOOD			Vice-President Name MICHAEL J. COLUCCI		
Street Address 101 GLOVER STREET			Street Address 94 FAIRHAVEN ROAD		
City PROVIDENCE	State RI	Zip 02908	City CUMBERLAND	State RI	Zip 02864
Secretary Name MICHAEL J. COLUCCI			Treasurer Name JOSEPH G. SALEM		
Street Address 94 FAIRHAVEN ROAD			Street Address 14 CONIFER DRIVE		
City CUMBERLAND	State RI	Zip 02864	City NORTH PROVIDENCE	State RI	Zip 02904
8. List ALL directors (names and addresses) Check the box to indicate an attachment ☒					
Director Name JOHN G. ABOOD			Director Name ROBERT D. BROWN, JR.		
Street Address 101 GLOVER STREET			Street Address 32 KING STREET		
City PROVIDENCE	State RI	Zip 02908	City COVENTRY	State RI	Zip 02816
Director Name EDWARD F. CLARK			Director Name DAVID T. COLUCCI		
Street Address 37 SHERRI DRIVE			Street Address 29 WHIPPLE COURT		
City NORTH PROVIDENCE	State RI	Zip 02911	City NORTH PROVIDENCE	State RI	Zip 02911
9. Shares Authorized		10. Shares Issued Check the box to indicate an attachment ☐			
This information is currently of record in the Department of State. Changes require an additional filing.		NUMBER OF SHARES		CLASS-SERIES	PAR VALUE
		725		COMMON	\$10.00 PAR
11. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the 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.					
Name of Authorized Representative JOHN G. ABOOD, PRESIDENT				Date 02/19/2018	
Signature of Authorized Representative 				FILED FEB 23 2018	

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.govBY KL 325 010

FORM 630 - Revised: 10/2017

EXHIBIT A
(NAME AND ADDRESS OF DIRECTORS)

1. John G. Abood
101 Glover Street, Providence, RI 02908
2. Robert D. Brown, Jr.
32 King Street, Coventry, RI 02816
3. Edward F. Clark
37 Sherri Drive, North Providence, RI 02911
4. David T. Colucci
29 Whipple Court, North Providence, RI 02911
5. Michael J. Colucci
94 Fairhaven Road, Cumberland, RI 02864
6. Paul A. Falso
10 Stony Lane, Smithfield, RI 02917
7. Gary D. Forloney
26 Naples Avenue, Providence, RI 02908
8. Edward Mourachian
19 Betsy Williams Circle, Johnston, RI 02919
9. Joseph G. Salem
14 Conifer Drive, North Providence, RI 02904
10. Raymond A. Wnuk
30 Conifer Drive, North Providence, RI 02904