



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


Annual Report for the year: **2018**

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.

1. Entity ID Number 00029360		2. Exact name of the Corporation South County Masonic Center	
3. State of Incorporation Rhode Island		5. Brief description of the character of business conducted in Rhode Island own and maintain real estate as a meeting place facility for fraternal organizations	
4. NAICS Code 813219 - Other Grantmaking <input type="checkbox"/>			
6. Principal Office Address 3965 South County Trail		City Charlestown	State RI
		Zip	
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
President Name Carl E. Richard		Vice-President Name Stanley Wostel	
Street Address 96 Shannock Hill Rd (PO Box 8)		Street Address 373 Hillsdale Rd	
City Shannock	State RI	City West Kingston	State RI
	Zip 02875		Zip 02892
Secretary Name Russell Lorenson		Treasurer Name Leon C. Knudsen	
Street Address 322 Skunk Hill Rd		Street Address 348 Plainfield Pike	
City Exeter	State RI	City Greene	State RI
	Zip 02822		Zip 02827
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment <input checked="" type="checkbox"/>			
Director Name Carl E. Richard		Director Name Stanley Wostel	
Street Address PO Box 8		Street Address 373 Hillsdale Rd	
City Shannock	State RI	City West Kingston	State RI
	Zip 02875		Zip 02892
Director Name Russell Lorenson		Director Name Leon C. Knudsen	
Street Address 322 Skunk Hill Rd		Street Address 348 Plainfield Pike	
City Exeter	State RI	City Greene	State RI
	Zip 02822		Zip 02827
9. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641.			
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.			
<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 Carl E. Richard, President 			Date May 25, 2018
Signature of Officer/Authorized Representative			
SIGN DOCUMENT HERE			

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

FILED
MAY 31 2018
BY 3315 DS

Additional Directors
South County Masonic Center
000029360
2018

John Anderson
21 Pine Shadows Drive
Hope Valley, RI 02832

Randy Joslin
197 Alton Bradford Rd
Bradford, RI 02808

John O. Matson
13 Brook Drive
Hope Valley RI 02832

29360

FILED

MAY 31 2018

BY 3315 DS