


 State of Rhode Island and Providence Plantations  
 Department of State - Business Services Division
Annual Report for the year: **2018**

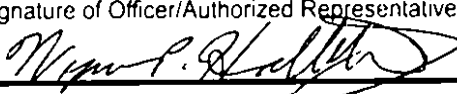
Non-Profit Corporation

→ Filing period: June 1 - June 30

→ Filing Fee: \$20.00

→ Penalty: Additional \$25.00 fee if form is not filed by July 30.

 RECEIVED  
 SECRETARY OF STATE  
 2018 JUN 12 AM 8:38  
 CORPORATIONS DIVISION

1. Entity ID Number <b>1669886</b>		2. Exact name of the Corporation <b>The Master, Wardens, and Brethren of St. John's Lodge of free and accepted Masons, No. 1 in the Town of Providence</b>			
3. State of Incorporation <b>RI</b>		5. Brief description of the character of business conducted in Rhode Island <b>A charitable fraternal organization</b>			
4. NAICS Code <b>813319 - Other Social Advoc</b>					
6. Principal Office Address <b>2115 Broad Street</b>		City <b>Cranston</b>		State <b>RI</b>	Zip <b>02905</b>
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment: <input type="checkbox"/></span>					
President Name <b>Edward D. Bertrand</b>			Vice-President Name <b>Richard Gonzalez</b>		
Street Address <b>73 Isle of Capri Road</b>			Street Address <b>80 Burnside Road</b>		
City <b>Coventry</b>	State <b>RI</b>	Zip <b>02816</b>	City <b>Cranston</b>	State <b>RI</b>	Zip <b>02910</b>
Secretary Name <b>Wyman P. Hallstrom, Jr.</b>			Treasurer Name <b>Ronald P. Reed</b>		
Street Address <b>P.O. Box 8397</b>			Street Address <b>P.O. Box 22</b>		
City <b>Warwick</b>	State <b>RI</b>	Zip <b>02888</b>	City <b>Albion</b>	State <b>RI</b>	Zip <b>02802</b>
8. 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>Edward D. Bertram</b>			Director Name <b>Richard Gonzalez</b>		
Street Address <b>73 Isle of Capri Road</b>			Street Address <b>80 Burnside Street</b>		
City <b>Coventry</b>	State <b>RI</b>	Zip <b>02816</b>	City <b>Cranston</b>	State <b>RI</b>	Zip <b>02910</b>
Director Name <b>Mazen El Alsabe</b>			Director Name		
Street Address <b>20 Annie Street</b>			Street Address		
City <b>ProvidenceRI</b>	State <b>02908</b>	Zip	City	State	Zip
9. 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>					
<i>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee</i>					
Name of Officer/Authorized Representative <b>Wyman P. Hallstrom, Jr., Secretary</b>				Date <b>6/11/2018</b>	
Signature of Officer/Authorized Representative 				<b>FILED</b> SIGN DOCUMENT HERE <b>JUN 12 2018</b> <b>HL 332447</b> <b>8:38</b>	