



**State of Rhode Island and Providence Plantations  
Office of the Secretary of State**

Fee: \$20.00

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

**Non-Profit Corporation  
Annual Report**

Filing Period: June 1 - June 30

*In accordance with R.I.G.L. 7-6-94, each corporation failing or refusing to file its annual report within the time prescribed by law (R.I.G.L. 7-6-91) is subject to a penalty fee of \$25.00.*

**ANNUAL REPORT YEAR:** 2019

**1. Corporate ID No.** 000028915

**2. Name of Corporation** Rhode Island Shriners Holding Corporation

**3. State of Incorporation**

State: RI

**ARTICLE III**

Using the dropdown labeled NAICS Code below, select the classification title that describes the primary type of activity in which your entity engages. The box to the right of the dropdown will populate a NAICS Code based on the chosen selection. If the NAICS Code is known, enter it into the box on the right. For further assistance with selecting a classification [click here](#).

NAICS Code

6

813990

**4. Corporate Address in Rhode Island**

No. and Street: ONE RHODES PLACE

City or Town: CRANSTON

State: RI

Zip: 02905

Country: USA

**5. Foreign Corporation. Enter Principal Office Address**

No. and Street:

City or Town: State: Zip: Country:

**6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island**

TO HOLD TITLE TO REAL ESTATE, COLLECT INCOME, RETURN NET PROCEEDS TO RHODE ISLAND SHRINERS

**7. Names and Addresses of the Officers and Directors:**

**All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**

**THE NUMBER OF DIRECTORS OF A DOMESTIC(RHODE ISLAND)CORPORATION SHALL NOT BE LESS THAN THREE(3). R.I.G.L. 7-6-23**

| <b>Title</b> | <b>Individual Name</b><br>First, Middle, Last, Suffix | <b>Address</b><br>Address, City or Town, State, Zip Code, Country |
|--------------|-------------------------------------------------------|-------------------------------------------------------------------|
| PRESIDENT    | DONALD WILLIAMSON                                     | 160 EVERLETH AVENUE<br>WARWICK, RI 02888 USA                      |
| TREASURER    | BRYAN MARTIN                                          | 143 LEWISTON STREET<br>WARWICK, RI 02889 USA                      |
| SECRETARY    | PAUL M HEALY                                          | 100 HOFFMAN AVENUE<br>CRANSTON, RI 02909 USA                      |
| DIRECTOR     | GILBERT W GALLAGHER                                   | 147 LINDY AVENUE<br>WARWICK, RI 02889 USA                         |
| DIRECTOR     | JASPER BEDROSIAN                                      | 76 MEREDITH DRIVE<br>CRANSTON, RI 02920 USA                       |
| DIRECTOR     | ROBERT CORREIA                                        | 3 MIDWAY DRIVE<br>WARWICK, RI 02886 USA                           |
| DIRECTOR     | FRANCESCO DIMASCIO                                    | PO BOX 19337<br>JOHNSTON, RI 02919 USA                            |
| DIRECTOR     | ALAN KINSLEY                                          | 71 BEAVER RIVER ROAD<br>WEST KINGSTON, RI 02892 USA               |
| DIRECTOR     | FRANK KNIGHT                                          | 3269 WEST SHORE ROAD<br>WARWICK, RI 02888 USA                     |
| DIRECTOR     | JAMES CONWAY, JR.                                     | 200 CENTRE STREET<br>RUMFORD, RI 02916 USA                        |
| DIRECTOR     | MIKE BRITO SR.                                        | 1070 FRENCHTOWN ROAD<br>EAST GREENWICH, RI 02818 USA              |

**8. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER**  
**Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78**

LEON C. KNUDSEN ONE RHODES PLACE CRANSTON , RI 02905

**9. This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver, or Trustee.**

**Signed this 30 Day of May, 2019 at 10:42:13 AM by the authorized person. This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-6.**

By LEON C. KNUDSEN  
Signature of Authorized Person

Form No. 631  
Revised 09/07

