



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State  
Matthew A. Brown, Secretary of State

Corporations Division  
100 North Main Street  
Providence, RI 02903-1335  
401.222.3040

**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005**

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. <b>21135</b>		2. Name of Corporation <b>RIVERSIDE CEMETERY ASSOCIATION</b>			
3. Street Address Principal Business Office <b>10 George Street PO Box 262</b>		City <b>Charlestown</b>	State <b>RI</b>	Zip <b>02813</b>	
4. Business Phone No. 		5. State of Incorporation <b>RHODE ISLAND</b>		6. SIC Code <b>8888</b>	
7. Brief Description of the Character of Business Conducted in Rhode Island <b>CEMETERY</b>					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name <b>Benjamin R. Robinson</b>			Vice President Name <b>Oliver H. P. Robinson</b>		
Street Address <b>3112 Vincent Road</b>			Street Address <del>339 Commonwealth Ave Apt 30</del> <b>87 Glen Rd - NC 10</b>		
City <b>W. Palm Beach</b>	State <b>FL</b>	Zip <b>33405</b>	City <del>Boston</del> <b>Brookline</b>	State <b>MA</b>	Zip <del>02115</del> <b>02445</b>
Secretary Name <b>Judith K. Robinson</b>			Treasurer Name <b>Judith K. Robinson</b>		
Street Address <b>7880 SE Loblolly Bay Drive</b>			Street Address <b>7880 SE Loblolly Bay Drive</b>		
City <b>Hobe Sound</b>	State <b>FL</b>	Zip <b>33455</b>	City <b>Hobe Sound</b>	State <b>FL</b>	Zip <b>33455</b>
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name <b>Mary Murdoch</b>			Director Name <b>Oliver H. P. Robinson</b>		
Street Address <b>4 Orchard Circle</b>			Street Address <del>339 Commonwealth Ave Apt 30</del> <b>87 Glen Rd - NC 10</b>		
City <b>Princeton</b>	State <b>NJ</b>	Zip <b>08540</b>	City <del>Boston</del> <b>Brookline</b>	State <b>MA</b>	Zip <del>02115</del> <b>02445</b>
Director Name <b>Judith K. Robinson</b>			Director Name 		
Street Address <b>7880 SE Loblolly Bay Drive</b>			Street Address 		
City <b>Hobe Sound</b>	State <b>FL</b>	Zip <b>33455</b>	City 	State 	Zip 
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> AUTHORIZED SHARES			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> ISSUED SHARES		
Number of Shares <b>200 \$25.00 PAR VALUE</b>	Class/Series 	Par Value 	Number of Shares <b>87</b>	Class/Series <b>Capital</b>	Par Value <b>\$25.00</b>

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



File Date	<b>2-7-05</b>
Check No.	<b>1574</b>
By:	<b>LB</b>
FOR SECRETARY OF STATE USE ONLY	

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.

**Judith K Robinson** 2/3/05  
Signature of Officer Date  
**Judith K. Robinson**  
Print or Type Name of Officer  
**Secretary**  
Title of Officer



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State  
Matthew A. Brown, Secretary of State

Corporations Division  
100 North Main Street  
Providence, RI 02903-1335  
401.222.3040

**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004**

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 21135		2. Name of Corporation RIVERSIDE CEMETERY ASSOCIATION		
3. Street Address Principal Business Office 10 George Street PO Box 262		City Charlestown	State RI	Zip 02813
4. Business Phone No.		5. State of Incorporation RHODE ISLAND		6. SIC Code 8888
7. Brief Description of the Character of Business Conducted in Rhode Island CEMETERY				
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
President Name Benjamin R. Robinson		Vice President Name Oliver H. P. Robinson		
Street Address 3112 Vincent Road		Street Address 339 Commonwealth Ave Apt 30		
City W. Palm Beach	State FL	Zip 33405	City Boston	State MA
Secretary Name Judith K. Robinson		Treasurer Name Judith K. Robinson		
Street Address 7880 SE Loblolly Bay Drive		Street Address 7880 SE Loblolly Bay Drive		
City Hobe Sound	State FL	Zip 33455	City Hobe Sound	State FL
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
Director Name Mary Murdoch		Director Name Oliver H. P. Robinson		
Street Address 4 Orchard Circle		Street Address 339 Commonwealth Ave Apt 30		
City Princeton	State NJ	Zip 08540	City Boston	State MA
Director Name Judith K. Robinson		Director Name Judith K. Robinson		
Street Address 7880 SE Loblolly Bay Drive		Street Address 7880 SE Loblolly Bay Drive		
City Hobe Sound	State FL	Zip 33455	City Hobe Sound	State FL
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>				
AUTHORIZED SHARES		ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series
200 \$25.00 PAR VALUE			87	Capital
				\$25.00

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



\* 2 1 1 3 5 \*

File Date: 3/16/04  
Check No.: 1479  
By: [Signature]  
FOR SECRETARY OF STATE USE ONLY

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.

[Signature] 3/10/04  
Signature of Officer Date

Judith K. Robinson

Print or Type Name of Officer

Secretary

Title of Officer



STATE OF RHODE ISLAND  
AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State

Edward S. Inman, III, Secretary of State  
Corporations Division  
100 North Main Street, Providence, RI 02903-1335  
401-222-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 21135  
2. Name of Corporation RIVERSIDE CEMETERY ASSOCIATION  
3. Street Address Principal Business Office  
10 George St. PO Box 262  
4. Business Phone No.  
5. State of Incorporation RHODE ISLAND

City Charlestown State RI Zip 02813  
6. SIC Code 8888

7. Brief Description of the Character of Business Conducted in Rhode Island  
Cemetery

8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name

Benjamin R. Robinson

Street Address

3112 Vincent Rd

City W. Palm Beach State FL Zip 33405

Secretary Name

Judith K. Robinson

Street Address

7880 SE Loblolly Bay Dr

City Hobe Sound State FL Zip 33455

Vice President Name

John R. Robinson Esq.

Street Address

10 Cliffdale Rd

City Greenwich State CT Zip 06380

Treasurer Name

Judith K. Robinson

Street Address

7880 SE Loblolly Bay Dr

City Hobe Sound State FL Zip 33455

9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name

Mary Murdoch

Street Address

4 Orchard Circle

City Princeton State NJ Zip 08540

Director Name

Judith K. Robinson

Street Address

7880 SE Loblolly Bay Dr

City Hobe Sound State FL Zip 33455

Director Name

Oliver H. P. Robinson

Street Address

339 Commonwealth Ave Apt 30

City Boston State MA Zip 02115

Director Name

Street Address

City State Zip

10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares Class/Series Par Value

200 \$25.00 PAR VALUE

11. SHARES ISSUED ("X" BOX FOR ATTACHMENT)

ISSUED SHARES

Number of Shares Class/Series Par Value

87 Capital \$25.00

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



\* 2 1 1 3 5 \*

File Date: 3-31-03

Check No.: 1378

By: [Signature]

FOR SECRETARY OF STATE USE ONLY

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.

[Signature] x 7-16-03  
Signature of Officer Date

Judith K. Robinson

Print or Type Name of Officer

Secretary

Title of Officer



STATE OF RHODE ISLAND  
AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State

Edward S. Inman, III, Secretary of State  
Corporations Division  
100 North Main Street, Providence, RI 02903-1335  
401-222-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.

21135

2. Name of Corporation

RIVERSIDE CEMETERY ASSOCIATION

3. Street Address Principal Business Office

10 George St./PO Box 262

City

Charlestown

State

RI

Zip

02813

4. Business Phone No.

5. State of Incorporation

RHODE ISLAND

6. SIC Code

8888

7. Brief Description of the Character of Business Conducted in Rhode Island

Cemetery

8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name

Benjamin R. Robinson

Vice President Name

John R. Robinson Esq.

Street Address

3112 Vincent Road

Street Address

10 Cliffdale Road

Secretary Name

Judith K. Robinson

Treasurer Name

Judith K. Robinson

Street Address

7880 SE Loblolly Bay Drive

Street Address

7880 SE Loblolly Bay Drive

City

1

State

Zip

Hobe Sound FL 33455

City

State

Zip

Hobe Sound FL 33455

9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name

Mary Murdoch

Director Name

Oliver H.P. Robinson

Street Address

4 Orchard Circle

Street Address

43 Telegraph Street

City

1

State

Zip

Princeton NJ 08540

City

State

Zip

S. Boston MA 02127

Director Name

Judith K. Robinson

Director Name

Street Address

7880 SE Loblolly Bay Drive

City

1

State

Zip

Hobe Sound FL 33455

City

State

Zip

10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

200 \$25.00 PAR VALUE

11. SHARES ISSUED ("X" BOX FOR ATTACHMENT)

ISSUED SHARES

Number of Shares

Class/Series

Par Value

87 Capital \$25.00

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



\* 2 1 1 3 5 \*

1/02

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.

Judith K Robinson

1/28/02

JUDITH K ROBINSON

Sec-Treas

JE ONLY

Form 630 12/01



STATE OF RHODE ISLAND  
AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State

Corporations Division  
100 North Main Street, Providence, RI 02903-1335  
401-222-3040



**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001**

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **21135** 2. Name of Corporation **RIVERSIDE CEMETERY ASSOCIATION**  
3. Street Address Principal Business Office City State Zip  
**10 George St./PO Box 262 Charlestown RI 02813**  
4. Business Phone No. 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **8888**

7. Brief Description of the Character of Business Conducted in Rhode Island  
**Cemetery**

8. NAMES AND ADDRESSES OF THE OFFICERS (\*X\* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name <b>Benjamin R. Robinson</b> Street Address <b>3112 Vincent Rd</b> City State Zip <b>W. Palm Beach FL 33405</b>	Vice President Name <b>John R. Robinson Esq.</b> Street Address <b>10 Cliffdale Rd.</b> City State Zip <b>Greenwich CT 06380</b>
Secretary Name <b>Judith K. Robinson</b> Street Address <b>7880 S.E. Loblolly Bay Dr.</b> City State Zip <b>Hobe Sound FL 33455</b>	Treasurer Name <b>Judith K. Robinson</b> Street Address <b>7880 S.E. Loblolly Bay Dr.</b> City State Zip <b>Hobe Sound FL 33455</b>

9. NAMES AND ADDRESSES OF THE DIRECTORS (\*X\* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name <b>Mary Murdoch</b> Street Address <b>4 Orchard Circle</b> City State Zip <b>Princeton NJ 08540</b>	Director Name <b>Oliver H.P. Robinson</b> Street Address <b>43 Telegraph Street</b> City State Zip <b>S. Boston MA 02127</b>
Director Name <b>Judith K. Robinson</b> Street Address <b>7880 S.E. Loblolly Bay Dr.</b> City State Zip <b>Hobe Sound FL 33455</b>	

10. SHARES AUTHORIZED (\*X\* BOX FOR ATTACHMENT)

AUTHORIZED SHARES		
Number of Shares	Class/Series	Par Value
<b>200 SHS</b>	<b>\$25.00</b>	<b>PAR VALUE</b>

11. SHARES ISSUED (\*X\* BOX FOR ATTACHMENT)

ISSUED SHARES		
Number of Shares	Class/Series	Par Value
<b>87</b>	<b>Capital</b>	<b>\$25.00</b>

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



\* 2 1 1 3 5 \*

File Date: **FILED**

Check No.: **FEB 05 2001**

By: **Ce 1178**

FOR SECRETARY OF STATE USE ONLY

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.

**Judith K Robinson**  
Signature of Officer Date

Print or Type Name of Officer

**See - Treas.**  
Title of Officer



STATE OF RHODE ISLAND  
AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State

James R. Langevin, Secretary of State  
Corporations Division  
100 North Main Street, Providence, RI 02903-1335  
401-222-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 21135 2. Name of Corporation RIVERSIDE CEMETERY ASSOCIATION

3. Street Address Principal Business Office 10 GEORGE ST. / P.O. BOX 262 City CHARLESTOWN State RI Zip 02813

4. Business Phone No. \_\_\_\_\_ 5. State of Incorporation RHODE ISLAND 6. SIC Code 8888

7. Brief Description of the Character of Business Conducted in Rhode Island  
CEMETERY

8. NAMES AND ADDRESSES OF THE OFFICERS (\*X\* BOX FOR ATTACHMENT) **FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name <u>BENJAMIN R. ROBINSON</u>	Vice President Name <u>JOHN R. ROBINSON ESQ</u>
Street Address <u>3112 VINCENT ROAD</u>	Street Address <u>10 CLIFFDALE ROAD</u>
City <u>W. PALM BEACH</u> State <u>FL</u> Zip <u>33405</u>	City <u>GREENWICH</u> State <u>CT</u> Zip <u>06380</u>
Secretary Name <u>JUDITH K. ROBINSON</u>	Treasurer Name <u>JUDITH K. ROBINSON</u>
Street Address <u>7880 S.E. LOBLULLY BAY DRIVE</u>	Street Address <u>7880 S.E. LOBLULLY BAY DRIVE</u>
City <u>HOBE SOUND</u> State <u>FL</u> Zip <u>33455</u>	City <u>HOBE SOUND</u> State <u>FL</u> Zip <u>33455</u>

9. NAMES AND ADDRESSES OF THE DIRECTORS (\*X\* BOX FOR ATTACHMENT) **FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name <u>MARY MURDOCH</u>	Director Name _____
Street Address <u>4 ORCHARD CIRCLE</u>	Street Address _____
City <u>PRINCETON</u> State <u>NJ</u> Zip <u>08540</u>	City _____ State _____ Zip _____
Director Name <u>JUDITH K. ROBINSON</u>	Director Name _____
Street Address <u>7880 S.E. LOBLULLY BAY DRIVE</u>	Street Address _____
City <u>HOBE SOUND</u> State <u>FL</u> Zip <u>33455</u>	City _____ State _____ Zip _____

10. SHARES AUTHORIZED (\*X\* BOX FOR ATTACHMENT)

AUTHORIZED SHARES  
Number of Shares \_\_\_\_\_ Class/Series \_\_\_\_\_ Par Value \_\_\_\_\_  
200 SHS \$25.00 PAR VALUE

11. SHARES ISSUED (\*X\* BOX FOR ATTACHMENT)

ISSUED SHARES  
Number of Shares \_\_\_\_\_ Class/Series \_\_\_\_\_ Par Value \_\_\_\_\_  
87 CAPITAL \$25.00

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



\* 2 1 1 3 5 \*

File Date: 2/7/00  
1095

Check No.: 2

By: \_\_\_\_\_

FOR SECRETARY OF STATE USE ONLY

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.

Signature of Officer BENJAMIN R. ROBINSON Date 1/28/00

Print or Type Name of Officer  
BENJAMIN R. ROBINSON

Title of Officer  
PRESIDENT

# PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR **1999**

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)



1. Corporate ID No. <b>21135</b>		2. Name of Corporation <b>RIVERSIDE CEMETERY ASSOCIATION</b>			
3. Street Address Principal Business Office <b>10 GEORGE ST / PO BOX 262</b>			City <b>CHARLESTOWN</b>	State <b>RI</b>	Zip <b>02813</b>
4. Business Phone No.		5. State of Incorporation <b>R.I.</b>			6. SIC Code <b>0000</b>
7. Brief Description of the Character of Business Conducted in Rhode Island <b>CEMETERY</b>					
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name <b>BENJAMIN R. ROBINSON</b>			Vice President Name <b>JOHN R. ROBINSON ESQ</b>		
Street Address <b>3112 VINCENT ROAD</b>			Street Address <b>10 CLIFFDALE ROAD</b>		
City <b>W. PALM BEACH</b>	State <b>FLA</b>	Zip <b>33405</b>	City <b>GREENWICH</b>	State <b>CT</b>	Zip <b>06380</b>
Secretary Name <b>JUDITH K. ROBINSON</b>			Treasurer Name <b>JUDITH K. ROBINSON</b>		
Street Address <b>7880 S.E. LOBLOLLY BAY DRIVE</b>			Street Address <b>7880 S.E. LOBLOLLY BAY DRIVE</b>		
City <b>HOBBS SOUND</b>	State <b>FLA</b>	Zip <b>33455</b>	City <b>HOBBS SOUND</b>	State <b>FLA</b>	Zip <b>33455</b>
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name <b>MARY MURDOCH</b>			Director Name <b>JOHN R. ROBINSON ESQ</b>		
Street Address <b>4 ORCHARD CIRCLE</b>			Street Address <b>10 CLIFFDALE ROAD</b>		
City <b>PRINCETON</b>	State <b>NJ</b>	Zip <b>08540</b>	City <b>GREENWICH</b>	State <b>CT</b>	Zip <b>06380</b>
Director Name <b>JUDITH K. ROBINSON</b>			Director Name		
Street Address <b>7880 S.E. LOBLOLLY BAY DRIVE</b>			Street Address		
City <b>HOBBS SOUND</b>	State <b>FLA</b>	Zip <b>33455</b>	City	State	Zip
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>			11. SHARES ISSUED (*X* BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
<b>200 SHS</b>	<b>\$25.00 PAR VALUE</b>		<b>87</b>	<b>CAPITAL</b>	<b>\$25.00</b>

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



File Date: **Feb 23, 99**  
Check No.: **998**  
By: **JD**  
FOR SECRETARY OF STATE USE ONLY

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.

**X** **BENJAMIN R. ROBINSON** **2/11/99**  
Signature of Officer Date  
**BENJAMIN R. ROBINSON**  
Print or Type Name of Officer  
**PRESIDENT**  
Title of Officer



STATE OF RHODE ISLAND  
AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State

James R. Langevin, Secretary of State  
Corporations Division  
100 North Main Street, Providence, RI 02903-1335  
401-277-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR **1998**

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. <b>21135</b>		2. Name of Corporation <b>RIVERSIDE CEMETERY ASSOCIATION</b>	
3. Street Address Principal Business Office <b>10 GEORGE ST / PO BOX 262</b>		City <b>CHARLESTOWN</b>	State <b>RI</b>
4. Business Phone No. <b>IN ACTUALITY RIVERSIDE CEMETERY DOES NOT HAVE A TELEPHONE</b>		Zip <b>02813</b>	6. SIC Code <b>8888</b>
5. State of Incorporation <b>RHODE ISLAND</b>		7. Brief Description of the Character of Business Conducted in Rhode Island <b>CEMETERY</b>	
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT)			
President Name <b>BENJAMIN R. ROBINSON</b>		Vice President Name <b>JOHN R. ROBINSON ESQ</b>	
Street Address <b>3112 VINCENT ROAD</b>		Street Address <b>10 CLIFFDALE ROAD</b>	
City <b>W. PALM BEACH</b>	State <b>FL</b>	City <b>GREENWICH</b>	State <b>CT</b>
Zip <b>33405</b>		Zip <b>06830</b>	
Secretary Name <b>JUDITH K. ROBINSON</b>		Treasurer Name <b>JUDITH K. ROBINSON</b>	
Street Address <b>30 CLYDE STREET</b>		Street Address <b>30 CLYDE STREET</b>	
City <b>BROOKLINE</b>	State <b>MA</b>	City <b>BROOKLINE</b>	State <b>MA</b>
Zip <b>02167</b>		Zip <b>02167</b>	
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT)			
Director Name <b>MARY MURDOCH</b>		Director Name <b>JOHN R. ROBINSON ESQ</b>	
Street Address <b>4 ORCHARD CIRCLE</b>		Street Address <b>10 CLIFFDALE ROAD</b>	
City <b>PRINCETON</b>	State <b>NJ</b>	City <b>GREENWICH</b>	State <b>CT</b>
Zip <b>08540</b>		Zip <b>06830</b>	
Director Name <b>JUDITH K. ROBINSON</b>		Director Name	
Street Address <b>30 CLYDE STREET</b>		Street Address	
City <b>BROOKLINE</b>	State <b>MA</b>	City	State
Zip <b>02167</b>		Zip	
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)			
ISSUED SHARES			
Number of Shares	Class/Series	Par Value	
<b>200 SHS</b>	<b>\$25.00</b>	<b>PAR VALUE</b>	
11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)			
ISSUED SHARES			
Number of Shares	Class/Series	Par Value	
<b>87</b>	<b>CAPITAL</b>	<b>\$25.00</b>	

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



File Date: 2/2/98  
Check No.: 909  
By: [Signature]  
FOR SECRETARY OF STATE USE ONLY

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.

X [Signature] Date 1/2/98  
Signature of Officer  
Print or Type Name of Officer  
**BENJAMIN R. ROBINSON**  
Title of Officer  
**PRESIDENT**





STATE OF RHODE ISLAND  
AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State

James R. Langevin, Secretary of State  
Corporations Division  
100 North Main Street, Providence, RI 02903-1335  
401-277-3040



PROFIT CORPORATION ANNUAL REPORT 1997

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **21135** 2. Name of Corporation **RIVERSIDE CEMETERY ASSOCIATION**

3. Street Address Principal Business Office **10 GEORGE ST PO BOX 262** City **CHARLESTOWN** State **RI** Zip **02813**  
4. Business Phone No. 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **8888**

7. Brief Description of the Character of Business Conducted in Rhode Island

**CEMETERY**

8. NAMES AND ADDRESSES OF THE OFFICERS (\*X\* BOX FOR ATTACHMENT)

President Name **BENJAMIN R. ROBINSON**  
Street Address **3112 VINCENT ROAD**  
City **W. PALM BEACH** State **FL** Zip **33405**

Secretary Name **JUDITH K ROBINSON**  
Street Address **30 CLYDE STREET**  
City **BROOKLINE** State **MA** Zip **02167**

Vice President Name **JOHN R. ROBINSON ESQ**  
Street Address **10 CLIFFDALE ROAD**  
City **GREENWICH** State **CT** Zip **06830**

Treasurer Name **JUDITH K ROBINSON**  
Street Address **30 CLYDE STREET**  
City **BROOKLINE** State **MA** Zip **02167**

9. NAMES AND ADDRESSES OF THE DIRECTORS (\*X\* BOX FOR ATTACHMENT)

Director Name **MARY MURDOCH**  
Street Address **4 ORCHARD CIRCLE**  
City **PRINCETON** State **NJ** Zip **08540**

Director Name **JUDITH K ROBINSON**  
Street Address **30 CLYDE STREET**  
City **BROOKLINE** State **MA** Zip **02167**

10. SHARES AUTHORIZED AND ISSUED (\*X\* BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares **200 SHS** Class/Series **CAPITAL \$25** Par Value **COMMON NO PAR VAL**

ISSUED SHARES

Number of Shares **87** Class/Series **CAPITAL** Par Value **\$25.00**

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



\* 2 1 1 3 5 \*

File Date: **4/21/97**

Check No.: **805**

By: **GAA**

FOR SECRETARY OF STATE USE ONLY

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.

**Judith K Robinson** 4/1/97  
Signature of Officer Date

**JUDITH K ROBINSON**  
Print or Type Name of Officer

**SECRETARY / TREASURER**  
Title of Officer

# PROFIT CORPORATION ANNUAL REPORT

## 1996



State of Rhode Island and Providence Plantations  
James R. Langevin, Secretary of State  
Corporations Division  
100 North Main Street  
Providence, Rhode Island 02903-1335 • (401) 277-3040

Filing Period: January 1-March 1

Filing Fee: \$50.00

PLEASE TYPE OR PRINT IN BLACK INK

1. CORPORATE ID NO. <b>21135</b>		2. NAME OF CORPORATION <b>RIVERSIDE CEMETERY ASSOCIATION</b>			
3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE <b>13 GEORGE ST., PO BOX 262</b>		CITY <b>CHARLESTOWN</b>	STATE <b>RI</b>		
		ZIP CODE <b>02813</b>			
4. BUSINESS PHONE NO.		5. STATE OF INCORPORATION <b>RHODE ISLAND</b>			
		6. SIC CODE <b>8888</b>			
7. BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE ISLAND <b>CEMETERY</b>					
8. NAMES AND ADDRESSES OF THE OFFICERS					
PRESIDENT NAME <b>BENJAMIN R. ROBINSON</b>		VICE PRESIDENT NAME <b>JOHN R. ROBINSON ESQ</b>			
STREET ADDRESS <b>33 SLEEPER ST APT 506</b>		STREET ADDRESS <b>10 CLIFFDALE ROAD</b>			
CITY <b>BOSTON</b>	STATE <b>MA</b>	CITY <b>GREENWICH</b>	STATE <b>CT</b>		
ZIP CODE <b>02101</b>		ZIP CODE <b>06830</b>			
SECRETARY NAME <b>JUDITH K. ROBINSON</b>		TREASURER NAME <b>JUDITH K. ROBINSON</b>			
STREET ADDRESS <b>30 CLYDE ST</b>		STREET ADDRESS <b>30 CLYDE STREET</b>			
CITY <b>BROOKLINE</b>	STATE <b>MA</b>	CITY <b>BROOKLINE</b>	STATE <b>MA</b>		
ZIP CODE <b>02167</b>		ZIP CODE <b>02167</b>			
9. NAMES AND ADDRESSES OF THE DIRECTORS					
DIRECTOR NAME <b>MARY MURDOCH</b>		DIRECTOR NAME <b>JOHN R. ROBINSON ESQ</b>			
STREET ADDRESS <b>4 ORCHARD CIRCLE</b>		STREET ADDRESS <b>10 CLIFFDALE ROAD</b>			
CITY <b>PRINCETON</b>	STATE <b>NJ</b>	CITY <b>GREENWICH</b>	STATE <b>CT</b>		
ZIP CODE <b>08540</b>		ZIP CODE <b>06830</b>			
DIRECTOR NAME <b>JUDITH K. ROBINSON</b>		DIRECTOR NAME			
STREET ADDRESS <b>30 CLYDE ST.</b>		STREET ADDRESS			
CITY <b>BROOKLINE</b>	STATE <b>MA</b>	CITY	STATE		
ZIP CODE <b>02167</b>		ZIP CODE			
10. SHARES AUTHORIZED AND ISSUED					
AUTHORIZED SHARES			ISSUED SHARES		
NUMBER OF SHARES	CLASS / SERIES	PAR VALUE	NUMBER OF SHARES	CLASS / SERIES	PAR VALUE
200 SHS	CAPITAL \$25 PAR VALUE		87	CAPITAL	\$25.00
	<del>COMMON NO PAR VAL</del>				

This report must be **SIGNED IN INK** by either the  
President, Vice President, Secretary, Assistant Secretary, Treasurer, 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.

File Date:

**3-13-96**

Check No:

**727**

By:

**164 / 16**

Signature of Officer

**JUDITH K. ROBINSON**

Print or Type Name of Officer

Title of Officer

Date

**3/11/96**

For Secretary of State Use Only

## State of Rhode Island and Providence Plantations



## Office of The Secretary of State

100 North Main Street

Providence, Rhode Island 02903-1335

401-277-3040

**ANNUAL REPORT**

Please Type or Print

File Annually - Jan. 1 - March 1

Filing Fee \$50.00

Make Checks Payable to: Secretary of State

**ALL ENTRIES MUST BE COMPLETED IN FULL OR THE FORM WILL BE RETURNED.**

0021135

1995

Corporate ID: \_\_\_\_\_ Annual Report for the year: \_\_\_\_\_

RIVERSIDE CEMETERY ASSOCIATION

Name of Corporation: \_\_\_\_\_

Business entity organized under the laws of the State of: Rhode Island

Business Entity is (check one):

For foreign entity, address and telephone number of principal office:

☒ Business Corporation (See RIGL Chapter 7-1.1)☐ Professional Service Corporation (See RIGL Chapter 7-5.1)

Phone: ( ) \_\_\_\_\_

Address and telephone of the principal office of business entity in Rhode

Island (Provide street address - Not P.O. Box):

10 George StreetCharlestown RI 02813

Phone: ( ) \_\_\_\_\_

Brief statement of the character of business conducted in Rhode Island:

Cemetery**THE NAMES OF THE OFFICERS ARE:**

	STREET ADDRESS	CITY/STATE	ZIP CODE
PRESIDENT Benjamin R. Robinson	33 Sleeper St Apt 506	Boston MA	02101
VICE PRESIDENT John R. Robinson Esq	10 Cliffdale Road	Greenwich CT	06830
SECRETARY Judith K. Robinson	30 Clyde Street	Brookline MA	02167
TREASURER Judith K. Robinson	30 Clyde Street	Brookline MA	02167

**THE NAMES OF THE DIRECTORS ARE:**

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
Samuel R. Robinson III	30 Clyde Street	Brookline MA	02167
Mary Murdoch	4 Orchard Circle	Princeton NJ	08540
John R. Robinson Esq	10 Cliffdale Road	Greenwich CT	06830
Judith K. Robinson	30 Clyde Street	Brookline MA	02167

NUMBER OF SHARES AUTHORIZED (Rider may be attached)

NUMBER OF SHARES ISSUED AND OUTSTANDING (Rider may be attached)

Number of Shares

Class / Series

Number of Shares

Class / Series

200

capital \$25.00 per value

87

capital \$25.00 per value

Date February 20, 1995By: Judith K Robinson

Judith K. Robinson

PRINT OR TYPE NAME OF OFFICER SIGNING

Secretary

TITLE OF OFFICER SIGNING

**DESIGNATED REGISTERED AGENT FOR SERVICE OF PROCESS:**

PLEASE NOTE: If the registered office and/or registered agent indicated below is incorrect, Form 9 must be filed.

ROBERT E. GATES  
1303 TURKS HEAD BUILDING  
PROVIDENCE RI 02903

**FILED**

FEB 22 1995

By DC # 635

Filing Fee \$50.00  
Payable to:  
Secretary of State

PLEASE TYPE or PRINT

State of Rhode Island and Providence Plantations  
Office of The Secretary of State  
100 North Main Street  
Providence, Rhode Island 02903-1335  
401-277-3040

File Annually  
I.L.C. Sept. 1 - Nov. 1  
CORP. Jan. 1 - March 1

PLPCK # 525  
ESD.

Corporate ID: 0021135 Annual Report for the year: 1994  
Name of Business Entity: RIVERSIDE CEMETERY ASSOCIATION

Business entity organized under the laws of the State of: Rhode Island

Federal Taxpayer Identification Number: [REDACTED]

For foreign entity, address and telephone number of principal office

Phone: ( )

Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box):

10 George Street

Charlestown RI 02813

Phone: (401) 364-6094

Business Entity is (check one):

- ☒ Business Corporation (See RIGL Chapter 7-1.1)  
☐ Professional Service Corporation (See RIGL Chapter 7-5.1)  
☐ Limited Liability Company (See RIGL 7-16)

Name, title and mailing address of contact person to whom communications may be directed:

Mr. Samuel R. Robinson

30 Clyde Street

Brookline MA 02167

Brief statement of the character of business conducted in Rhode Island:

Cemetery

Date of Organization: 11/1870 ME

Date of Qualification to do business in Rhode Island (if foreign entity):

THE NAMES OF THE OFFICERS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
<input type="checkbox"/> CHIEF EXECUTIVE OFFICER OR <input checked="" type="checkbox"/> PRESIDENT (Check One) Samuel R. Robinson III	30 Clyde Street	Brookline MA	02167
<input type="checkbox"/> CHIEF OPERATING OFFICER OR <input checked="" type="checkbox"/> VICE PRESIDENT (Check One) John R. Robinson ESQ	10 Cliffdale Road	Greenwich CT	06830
<input type="checkbox"/> CLERK OF RECORDS OR <input checked="" type="checkbox"/> SECRETARY (Check One) Judith K. Robinson	30 Clyde Street	Brookline MA	02167
<input type="checkbox"/> CHIEF FINANCIAL OFFICER OR <input checked="" type="checkbox"/> TREASURER (Check One) Judith K. Robinson	30 Clyde Street	Brookline MA	02167

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
Samuel R. Robinson III	30 Clyde Street	Brookline MA	02167
Mrs. Paul A. Cullens	33 Cleveland Lane	Princeton NJ	08540
John R. Robinson ESQ	10 Cliffdale Road	Greenwich CT	06830
Judith K. Robinson	30 Clyde Street	Brookline MA	02167

NUMBER OF SHARES AUTHORIZED (If Applicable)

NUMBER 200

CLASS Capital

SERIES

PAR VALUE OR  
WITHOUT PAR \$25

NUMBER OF SHARES ISSUED AND OUTSTANDING (If Applicable)

NUMBER 87

CLASS Capital

SERIES

PAR VALUE OR  
WITHOUT PAR \$25

Date MARCH 19 94

By: [Signature]

Samuel R. Robinson III

PRINT OR TYPE NAME OF OFFICER SIGNING

President

TITLE OF OFFICER SIGNING

Form 3 1/94

DESIGNATED REGISTERED OR RESIDENT AGENT FOR SERVICE OF PROCESS:

PLEASE NOTE: If the Corporation has changed its registered office and/or registered or resident agent, Form 9 or Form I.L.C. 3 must be filed.

ROBERT B. GATES  
100 TURK'S HEAD BUILDING  
PROVIDENCE RI 02903

MAR 21 1994  
ME59

Filing Fee \$50.00

To be filed annually between  
January 1st and March 1st

44477  
**State of Rhode Island and Providence Plantations**

CORPORATIONS DIVISION  
100 NORTH MAIN STREET  
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 0021135 Annual Report for the year 1993

FIRST: The name of the corporation is RIVERSIDE CEMETERY ASSOCIATION

SECOND: It is incorporated under the laws of RHODE ISLAND

THIRD: Character of business, briefly stated, is Cemetery

FOURTH: If foreign corporation, address of its principal office N/A

FIFTH: Business address in Rhode Island

Box 262 10 George Street Charlestown RI 02813

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
Mrs. Paul A. Cullens	Director	33 Cleveland Lane Princeton NJ 08540
Samuel R. Robinson III		30 Clyde Street Brookline MA 02167
John R. Robinson Esq.	Director	10 Cliffdale Road Greenwich CT 06830
Judith K. Robinson	Director	30 Clyde Street Brookline MA 02167
Samuel R. Robinson III	President	30 Clyde Street Brookline MA 02167
John R. Robinson Esq.	Vice President	10 Cliffdale Road Greenwich CT 06830
Benjamin R. Robinson	2nd Vice Pres	30 Clyde Street Brookline MA 02167
Judith K. Robinson	Secretary	30 Clyde Street Brookline MA 02167
Judith K. Robinson	Treasurer	30 Clyde Street Brookline MA 02167

SEVENTH: Number of Shares authorized:

No. of Shares	Class
200	Capital

Series  
**PAID**

Par Value  
or statement that  
shares are without  
par value

\$25

**JAN 25 1993**

EIGHTH: Number of Shares issued:

No. of Shares	Class
87	Capital

SEC'y OF STATE

Par Value  
or statement that  
shares are without  
par value

\$25

Dated January 18 19 93

RIVERSIDE CEMETERY ASSOCIATION

(Name of Corporation)

By X Samuel R. Robinson III

Title President

(Report must be signed by an officer)

Filing Fee \$50.00

To be filed annually between  
January 1st and March 1st

# State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION  
100 NORTH MAIN STREET  
PROVIDENCE, RHODE ISLAND 02903

Corporate ID.....0021135..... Annual Report for the year.....1992.....

FIRST: The name of the corporation is.....RIVERSIDE CEMETERY ASSOCIATION.....

SECOND: It is incorporated under the laws of.....RHODE ISLAND.....

THIRD: Character of business, briefly stated, is.....

CEMETERY

FOURTH: If foreign corporation, address of its principal office.....

FIFTH: Business address in Rhode Island.....

Box 262 Charlestown 02813

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name

Office

Address (including number, street, zip code)

Mrs. Paul A. Cullens	Director	33 Cleveland Lane Princeton NJ 08540
Samuel R. Robinson III	Director	30 Clyde Street Brookline MA 02167
John R. Robinson Esq	Director	10 Cliffdale Road Greenwich CT 06830
Judith K. Robinson	Director	30 Clyde Street Brookline MA 02167
Samuel R. Robinson III	President	30 Clyde Street Brookline MA 02167
John R. Robinson Esq	Vice President	10 Cliffdale Road Greenwich CT 06830
Benjamin R. Robinson	2nd Vice Pres	30 Clyde Street Brookline MA 02167
Judith K. Robinson	Secretary	30 Clyde Street Brookline MA 02167
Judith K. Robinson	Treasurer	30 Clyde Street Brookline MA 02167

SEVENTH: Number of Shares authorized:

No. of Shares

Class

Series

Par Value  
or statement that  
shares are without  
par value  
\$25

200

capital

EIGHTH: Number of Shares issued:

No. of Shares

Class

Series

Par Value  
or statement that  
shares are without  
par value  
\$25

87

capital

Dated.....January 27..... 19 92.....

RIVERSIDE CEMETERY ASSOCIATION

(Name of Corporation)

## State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION  
100 NORTH MAIN STREET  
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 0021135 Annual Report for the year 1991

FIRST: The name of the corporation is RIVERSIDE CEMETERY ASSOCIATION

SECOND: It is incorporated under the laws of RHODE ISLAND

THIRD: Character of business, briefly stated, is

CEMETERY

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island

Box 262 Charlestown RI 02813

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
Mrs. Paul A. Cullens	Director	33 Cleveland Lane Princeton NJ 08540
Samuel R. Robinson III	Director	30 Clyde Street Brookline MA 02167
John R. Robinson Esq.	Director	10 Cliffdale Road, Greenwich CT 06830
Judith K. Robinson	Director	30 Clyde Street Brookline MA 02167
Samuel R. Robinson III	President	30 Clyde Street Brookline MA 02167
Oliver H. P. ROBINSON	2nd Vice Pres	30 Clyde St. Brookline, Ma. 02167
<del>John R. Robinson Esq.</del>	Vice President	<del>10 Cliffdale Road, Greenwich CT 06830</del>
Benjamin R. Robinson	Vice Pres	30 Clyde Street Brookline MA 02167
Judith K. Robinson	Secretary	30 Clyde Street Brookline MA 02167
Judith K. Robinson	Treasurer	30 Clyde Street Brookline MA 02167

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
200	Capital		\$25

PAID

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
87	Capital		\$25

Dated February 1991

RIVERSIDE CEMETERY ASSOCIATION  
(Name of Corporation)By Samuel R. Robinson III  
President

(Report must be signed by an officer)

Title

Filing Fee \$15.00

To be filed annually between  
January 1st and March 1st

# State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION  
100 NORTH MAIN STREET  
PROVIDENCE, RHODE ISLAND 02903

Corporate ID.....0021135..... Annual Report for the year.....1990.....

FIRST: The name of the corporation is.....RIVERSIDE CEMETERY ASSOCIATION.....

SECOND: It is incorporated under the laws of.....RHODE ISLAND.....

THIRD: Character of business, briefly stated, is.....

CEMETERY

FOURTH: If foreign corporation, address of its principal office.....

FIFTH: Business address in Rhode Island.....

P.O. Box 262 Charlestown RI 02813

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
Mrs. Paul A. Cullens	Director	33 Cleveland Lane Princeton NJ 08540
S. R. Robinson III	Director	30 Clyde St Brookline MA 02167
John R. Robinson Esc	Director	10 Cliffdale Road Greenwich CT 06830
Judith K. Robinson	Director	30 Clyde St Brookline MA 02167
S. R. Robinson III	President	30 Clyde St Brookline MA 02167
John R. Robinson Esc	Vice President	10 Cliffdale Road Greenwich CT 06830
Benjamin R. Robinson	2nd Vice Pres	30 Clyde St Brookline MA 02167
Judith K. Robinson	Secretary	30 Clyde St Brookline MA 02167
Judith K. Robinson	Treasurer	30 Clyde St Brookline MA 02167

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
200	Capital	--	\$25

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
87	Capital	--	\$25

Dated.....February 23..... 19 90.....

RIVERSIDE CEMETERY ASSOCIATION  
(Name of Corporation)

By X.....Samuel R. Robinson.....

Title.....President.....

(Report must be signed by an officer)



## State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION  
270 WESTMINSTER MALL  
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 21135 Annual Report for the year 1989

FIRST: The name of the corporation is RIVERSIDE CEMETERY ASSOCIATION

SECOND: It is incorporated under the laws of RHODE ISLAND

THIRD: Character of business, briefly stated, is CEMETERY

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island BOX 262 CHARLESTOWN

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name

Office

Address (including number, street, zip code)

MRS. PAUL A CULLENS	Director	33 CLEVELAND LANE, PRINCETON NJ 08540
S. R. ROBINSON III	DIRECTOR	30 CLYDE ST, BROOKLINE MA 02167
JOHN R. ROBINSON, ESQ.	Director	10 CLIFFDALE ROAD, GREENWICH CT 06830
JUDITH K. ROBINSON	Director	30 CLYDE ST, BROOKLINE MA 02167
S. R. ROBINSON III	President	30 CLYDE ST, BROOKLINE MA 02167
JOHN R. ROBINSON ESQ.	Vice President	10 CLIFFDALE ROAD, GREENWICH CT 06830
BENJAMIN R. ROBINSON	2ND VICE PRES	30 CLYDE ST, BROOKLINE MA 02167
JUDITH K. ROBINSON	Secretary	30 CLYDE ST, BROOKLINE MA 02167
JUDITH K. ROBINSON	Treasurer	30 CLYDE ST, BROOKLINE MA 02167

SEVENTH: Number of Shares authorized:

No. of Shares

Class

Series

Par Value  
or statement that  
shares are without  
par value

200

CAPITAL

\$25

EIGHTH: Number of Shares issued:

No. of Shares

Class

Series

Par Value  
or statement that  
shares are without  
par value

87

CAPITAL

\$25

Dated FEBRUARY 26, 1989

RIVERSIDE CEMETERY ASSOCIATION  
(Name of Corporation)

By

PRESIDENT

(Report must be signed by an officer)

Filing Fee \$15.00

To be filed annually between  
January 1st and March 1st

# State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION  
270 WESTMINSTER MALL  
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 21135 Annual Report for the year 1988

FIRST: The name of the corporation is RIVERSIDE CEMETERY ASSOCIATION

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is CEMETERY

FOURTH: If foreign corporation, address of its principal office.....

FIFTH: Business address in Rhode Island PO BOX 262, CHARLESTOWN RI 02813

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
MRS. PAUL A. CULLENS	Director	33 CLEVELAND LANE, PRINCETON NJ 08540
S. R. ROBINSON III	Director	30 CLYDE ST., BROOKLINE MA 02167
JOHN R. ROBINSON ESQ.	Director	SUNSET LANE, RYE NY 10580
JUDITH K. ROBINSON	Director	30 CLYDE ST., BROOKLINE MA 02167
S. R. ROBINSON III	President	30 CLYDE ST., BROOKLINE MA 02167
JOHN R. ROBINSON ESQ.	Vice President	SUNSET LANE, RYE NY 10580
BENJAMIN R. ROBINSON	2ND VP	30 CLYDE ST., BROOKLINE MA 02167
JUDITH K. ROBINSON	Secretary	30 CLYDE ST., BROOKLINE MA 02167
JUDITH K. ROBINSON	Treasurer	30 CLYDE ST., BROOKLINE MA 02167

SEVENTH: Number of Shares authorized:

No. of Shares	Class
200	CAPITAL

PAID

JAN 26 1988

Par Value  
or statement that  
shares are without  
par value

\$25

EIGHTH: Number of Shares issued:

No. of Shares	Class
87	CAPITAL

SECY. OF STATE

Series

Par Value  
or statement that  
shares are without  
par value

\$25

Dated JANUARY 18 19 88

RIVERSIDE CEMETERY ASSOCIATION

(Name of Corporation)

By Samuel R. Robinson III

Title PRESIDENT

(Report must be signed by an officer)

**State of Rhode Island and Providence Plantations**CORPORATIONS DIVISION  
270 WESTMINSTER MALL  
PROVIDENCE, RHODE ISLAND 02903Corporate ID 21135 Annual Report for the year 1987FIRST: The name of the corporation is RIVERSIDE CEMETERY ASSOCIATIONSECOND: It is incorporated under the laws of Rhode IslandTHIRD: Character of business, briefly stated, is CEMETERY

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island PO BOX 262, CHARLESTOWN RI 02813

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
MRS. PAUL A. CULLENS	Director	33 CLEVELAND LANE, PRINCETON NJ 08540
S. R. ROBINSON III	DIRECTOR	30 CLYDE ST, CHESTNUT HILL MA 02167
JOHN R. ROBINSON ESQ.	Director	SUNSET LANE, RYE NY 10580
JUDITH K. ROBINSON	Director	30 CLYDE ST, CHESTNUT HILL MA 02167
S. R. ROBINSON III	President	30 CLYDE ST, CHESTNUT HILL MA 02167
JOHN R. ROBINSON ESQ.	Vice President	SUNSET LANE RYE NY 10580
BENJAMIN R. ROBINSON	2ND VP	30 CLYDE ST, CHESTNUT HILL MA 02167
JUDITH K. ROBINSON	Secretary	30 CLYDE ST, CHESTNUT HILL MA 02167
JUDITH K. ROBINSON	Treasurer	30 CLYDE ST, CHESTNUT HILL MA 02167

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
200	CAPITAL	--	\$25

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
87	CAPITAL	--	\$25

**PAID****FEB 12 1987****SEC'Y. OF STATE**Dated FEBRUARY 19 87 RIVERSIDE CEMETERY ASSOCIATION

(Name of Corporation)

By

*Samuel R. Robinson*

(Report must be signed by an officer)

Title PRESIDENT

## State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION  
270 WESTMINSTER MALL  
PROVIDENCE, RHODE ISLAND 02903

Corporate ID.....21135..... Annual Report for the year.....1986.....

FIRST: The name of the corporation is.....RIVERSIDE CEMETERY ASSOCIATION.....

SECOND: It is incorporated under the laws of.....Rhode Island.....

THIRD: Character of business, briefly stated, is.....  
CEMETERY.....

FOURTH: If foreign corporation, address of its principal office.....

FIFTH: Business address in Rhode Island.....PO BOX 262, Charlestown RI 02813.....

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
Mrs. Paul A. Cullens	Director	33 Cleveland Lane, Princeton NJ 08540
S. R. Robinson III	Director	96 Craft Road, Chestnut Hill MA 02167
John R. Robinson Esq	Director	Sunset Lane, Rye NY 10580
Judith K. Robinson	Director	96 Craft Road, Chestnut Hill MA 02167
S. R. Robinson III	President	96 Craft Road, Chestnut Hill MA 02167
John R. Robinson Esq	Vice President	Sunset Lane, Rye NY 10580
Benjamin R. Robinson	2nd VP	96 Craft Road, Chestnut Hill MA 02167
Judith K. Robinson	Secretary	96 Craft Road, Chestnut Hill MA 02167
Judith K. Robinson	Treasurer	96 Craft Road, Chestnut Hill MA 02167

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
200	capital	--	\$25

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
87	capital	--	\$25

Dated.....January 22,.....19 86.....

RIVERSIDE CEMETERY ASSOCIATION  
(Name of Corporation)By.....*Samuel R. Robinson*.....  
Title:.....PRESIDENT.....

FEB 19 1986

(Report must be signed by an officer)

## State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION  
270 WESTMINSTER MALL  
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 21135

Annual Report for the year 1985

FIRST: The name of the corporation is RIVERSIDE CEMETERY ASSOCIATION

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is

CEMETERY

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island PO BOX 262, Charlestown RI 02813

SIXTH: Names and addresses of its directors and officers:

(Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
Mrs. Paul A. Cullens	Director	33 Cleveland Lane, Princeton NJ 08540
S. R. Robinson III	Director	96 Craft Road Chestnut Hill MA 02167
John R. Robinson Esq	Director	Sunset Lane Rye NY 10580
Judith K. Robinson	Director	96 Craft Road Chestnut Hill MA 02167
S. R. Robinson III	President	96 Craft Road Chestnut Hill MA 02167
John R. Robinson Esq	Vice President	Sunset Lane Rye NY 10580
Benjamin R. Robinson	2nd VP	96 Craft Road Chestnut Hill MA 02167
Judith K. Robinson	Secretary	96 Craft Road Chestnut Hill MA 02167
Judith K. Robinson	Treasurer	96 Craft Road Chestnut Hill MA 02167

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
200	capital	--	\$25

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
87	capital	--	\$25

Dated 2/21 1985

RECEIVED MAR 1985

RIVERSIDE CEMETERY ASSOCIATION

(Name of Corporation)

By

Samuel R. Robinson

(Report must be signed by an officer)

Title PRESIDENT

Filing fee: \$15.00

To be filed annually between  
January 1st and March 1st

**State of Rhode Island and Providence Plantations**  
**OFFICE OF THE SECRETARY OF STATE**

Annual Report for the year 1984

FIRST: The name of the corporation is

RIVERSIDE CEMETERY ASSOCIATION

SECOND: It is incorporated under the laws of RHODE ISLAND

THIRD: Character of business, briefly stated, is

CEMETERY

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island (blank reports will be mailed to this address) PO BOX 262, Charlestown RI 02813

SIXTH: Names and addresses of its directors and officers:

(Addresses must include street and number, if any)

Name	Office	Address
Mrs. Paul A. Cullens	Director	33 Cleveland Lane, Princeton NJ 08540
S. R. Robinson III	Director	96 Craft Road, Chestnut Hill MA 02167
John R. Robinson Esq	Director	Sunset Lane, Rye NY 10580
Judith K. Robinson	Director	96 Craft Road, Chestnut Hill MA 02167
S. R. Robinson III	President	96 Craft Road, Chestnut Hill MA 02167
John R. Robinson Esq	1st Vice President	Sunset Lane, Rye NY 10580
Benjamin R. Robinson	2nd Vice Pres.	96 Craft Road, Chestnut Hill MA 02167
Judith K. Robinson	Secretary	96 Craft Road, Chestnut Hill MA 02167
Judith K. Robinson	Treasurer	96 Craft Road, Chestnut Hill MA 02167

(If additional space is needed, attach rider)

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
200	capital	--	\$25

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
87	capital	--	\$25

Dated: February 13, 1984

RIVERSIDE CEMETERY ASSOCIATION

(Name of Corporation)

By

Title

(Report must be signed by an officer)

If the corporation has changed its registered office and/or its registered agent,  
Form #9 must be filed. Please contact Corporation Division for information. 277-3040

Filing fee: \$15.00

To be filed annually between  
January 1st and March 1st

**State of Rhode Island and Providence Plantations**  
**OFFICE OF THE SECRETARY OF STATE**

Annual Report for the year 1983

FIRST: The name of the corporation is RIVERSIDE CEMETERY ASSOCIATION

SECOND: It is incorporated under the laws of RHODE ISLAND

THIRD: Character of business, briefly stated, is

CEMETERY

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island (blank reports will be mailed to this address) PO Box 262. CHARLESTOWN RHODE ISLAND 02813

SIXTH: Names and addresses of its directors and officers:

(Addresses must include street and number, if any)

Name	Office	Address
Mrs. Paul A. Cullens	Director	4E Heritage Village, Southbury Ct 06488
S. R. Robinson III	Director	96 Craft Rd., Chestnut Hill MA 02167
John R. Robinson Esq	Director	Sunset Lane Rye NY 10580
Judith K. Robinson	Director	96 Craft Rd Chestnut Hill MA 02167
S. R. Robinson III	President	96 Craft Rd Chestnut Hill MA 02167
John R. Robinson Esq	Vice President	Sunset Lane Rye NY 10580
Benjamin R. Robinson	2nd Vice Pres	96 Craft Rd Chestnut Hill MA 02167
Judith K. Robinson	Secretary	96 Craft Rd Chestnut Hill MA 02167
Judith K. Robinson	Treasurer	96 Craft Rd Chestnut Hill MA 02167

(If additional space is needed, attach rider)

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
200	capital	--	\$25

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
87	capital	--	\$25

Dated: 3/1 1983

RIVERSIDE CEMETERY ASSOCIATION

(Name of Corporation)

Judith K. Robinson  
Director - Sec. - Treas.

(Report must be signed by an officer)

If the corporation has changed its registered office and/or its registered agent,  
Form #9 must be filed. Please contact Corporation Division for information. 277-3040

Filing fee: \$15.00

To be filed annually  
between January 1st and March 1st

# State of Rhode Island and Providence Plantations

## OFFICE OF THE SECRETARY OF STATE

### ANNUAL REPORT

#### OF

#### RIVERSIDE CEMETERY ASSOCIATION

Pursuant to the provisions of Section 7.1.1-118 of the General Laws, 1956, as amended, the undersigned corporation hereby submits the following annual report:

FIRST: The name of the corporation is RIVERSIDE CEMETERY ASSOCIATION.

SECOND: It is incorporated under the laws of RHODE ISLAND.

THIRD: The address of its registered office in Rhode Island is  
CROSSLAND PARK, CHARLESTOWN 02813

and the name of its registered agent in Rhode Island at such address is  
ROBERT B. GATES, 66 SILVER LAKE AVENUE WAKEFIELD RI 02879

FOURTH: If a foreign corporation, the address of its principal office in the state or country under the laws of which it is incorporated is

FIFTH: The character of the business in which it is actually engaged in Rhode Island, briefly stated, is CEMETERY

SIXTH: The names and respective addresses of its directors and officers are:

Name	Office	Address
Mrs. Paul A. Cullens	Director	4E Heritage Village Southbury Ct 06488
S. R. Robinson III	Director	96 Craft Road Chestnut Hill MA 02167
John R. Robinson Esq	Director	Sunset Lane, Rye NY 10580
Judith K. Robinson	Director	96 Craft Road Chestnut Hill MA 02167
	Director	
	Director	
S. R. Robinson III	President	96 Craft Road Chestnut Hill MA 02167
John R. Robinson Esq	Vice President	Sunset Lane Rye NY 10580
Benjamin R. Robinson	1st Vice Pres	96 Craft Road Chestnut Hill MA 02167
Judith K. Robinson	Secretary	96 Craft Rd Chestnut Hill MA 02167
Judith K. Robinson	Treasurer	96 Craft Rd Chestnut Hill MA 02167

SEVENTH: The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class	Series	Par Value per Share or Statement that Shares are without Par Value
200	Capital	62	\$25

JUL 10 1982

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EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

<u>Number of Shares</u>	<u>Class</u>	<u>Series</u>	<u>Par Value per Share or Statement that Shares are without Par Value</u>
87	Capital	---	\$25

Dated June 22, 1982

RIVERSIDE CEMETERY ASSOCIATION

(NAME OF CORPORATION)

By J. Rockman Robinson  
Its President

Filing fee: \$15.00

To be filed annually  
between January 1st and March 1st

**State of Rhode Island and Providence Plantations**  
**OFFICE OF THE SECRETARY OF STATE**  
**ANNUAL REPORT**  
**OF**

RIVERSIDE CEMETERY ASSOCIATION

Pursuant to the provisions of Section 7.1.1-118 of the General Laws, 1956, as amended, the undersigned corporation hereby submits the following annual report:

FIRST: The name of the corporation is Riverside Cemetery Association

SECOND: It is incorporated under the laws of Rhode Island

THIRD: The address of its registered office in Rhode Island is

Crossland Park, Charlestown RI 02813

and the name of its registered agent in Rhode Island at such address is

Robert B. Gates, 66 Silver Lake Ave., Wakefield RI 02879

FOURTH: If a foreign corporation, the address of its principal office in the state or country under the laws of which it is incorporated is

FIFTH: The character of the business in which it is actually engaged in Rhode Island, briefly stated, is Cemetery

SIXTH: The names and respective addresses of its directors and officers are:

Name	Office	Address
Mrs. Paul A. Cullene	Director	4E Heritage Village Southbury Ct 06488
S. R. Robinson III	Director	96 Crafts Rd, Chestnut Hill Ma 02167
Ruth S. Robinson	Director	1509 25th Ave., Vero Beach Fla 32960
John R. Robinson Esq	Director	Sunset Lane, Rye NY 10580
	Director	
	Director	
S. R. Robinson III	President	96 Craft Rd, Chestnut Hill Ma 02167
John R. Robinson Esq	Vice President	Sunset Lane, Rye NY 10580
Judith K. Robinson	Secretary	96 Craft Rd, Chestnut Hill Ma 02167
Ruth S. Robinson	Treasurer	1500 25th Ave., Vero Beach Fla 32960

SEVENTH: The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class	Series	Par Value per Share or Statement that Shares are without Par Value
200	Capital	6 29 01	\$25

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JUL 9 1981

EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

<u>Number of Shares</u>	<u>Class</u>	<u>Series</u>	<u>Par Value per Share or Statement that Shares are without Par Value</u>
87	Capital	--	\$25

Dated June 23, 1981

RIVERSIDE CEMETERY ASSOCIATION  
(NAME OF CORPORATION)

By

President J. R. Robinson III  
by Barbara L. Quake  
Its **PRESIDENT**

Filing fee: \$15.00

To be filed annually  
between January 1st and March 1st

**State of Rhode Island and Providence Plantations**

**OFFICE OF THE SECRETARY OF STATE**

**ANNUAL REPORT**

**OF**

**RIVERSIDE CEMETERY ASSOCIATION**

Pursuant to the provisions of Section 7.1.1-118 of the General Laws, 1956, as amended, the undersigned corporation hereby submits the following annual report:

FIRST: The name of the corporation is Riverside Cemetery Association

SECOND: It is incorporated under the laws of Rhode Island

THIRD: The address of its registered office in Rhode Island is

Crossland Park, Charlestown RI 02813

and the name of its registered agent in Rhode Island at such address is

Robert B. Gates, 66 Silver Lake Ave., Wakefield RI 02879

FOURTH: If a foreign corporation, the address of its principal office in the state or country under the laws of which it is incorporated is.

FIFTH: The character of the business in which it is actually engaged in Rhode Island, briefly stated, is Cemetery

SIXTH: The names and respective addresses of its directors and officers are:

Name	Office	Address
Mrs. Paul A. Cullens	Director	4E Heritage Village Southbury Ct 06488
S. R. Robinson III	Director	96 Crafts Rd, Chestnut Hill Ma 02167
Ruth S. Robinson	Director	1509 25th Ave., Vero Beach Fla 32960
John R. Robinson Esq	Director	Sunset Lane, Rye NY 10580
	Director	
	Director	
S. R. Robinson III	President	96 Craft Rd, Chestnut Hill Ma 02167
John R. Robinson Esq	Vice President	Sunset Lane, Rye NY 10580
Judith K. Robinson	Secretary	96 Craft Rd., Chestnut Hill Ma 02167
Ruth S. Robinson	Treasurer	1509 25th Ave., Vero Beach Fla 32960

SEVENTH: The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class	Series	Par Value per Share or Statement that Shares are without Par Value
200	Capital	3	\$25

MAR 28 1980

9901A140000150031

EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

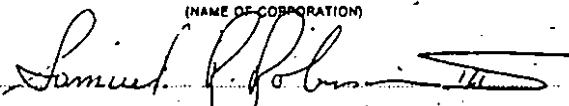
<u>Number of Shares</u>	<u>Class</u>	<u>Series</u>	<u>Par Value per Share or Statement that Shares are without Par Value</u>
87	Capital	--	\$25

Dated February , 19 80

RIVERSIDE CEMETERY ASSOCIATION

(NAME OF CORPORATION)

By



Its President

Filing fee: \$15.00

To be filed annually  
between January 1st and March 1st

# State of Rhode Island and Providence Plantations

## OFFICE OF THE SECRETARY OF STATE

### ANNUAL REPORT

OF

#### RIVERSIDE CEMETERY ASSOCIATION

Pursuant to the provisions of Section 7.1.1-118 of the General Laws, 1956, as amended, the undersigned corporation hereby submits the following annual report:

FIRST: The name of the corporation is

RIVERSIDE CEMETERY ASSOCIATION

SECOND: It is incorporated under the laws of

RHODE ISLAND

THIRD: The address of its registered office in Rhode Island is

66 Silver Lake Avenue, Wakefield, Rhode Island 02879

and the name of its registered agent in Rhode Island at such address is

ROBERT B. GATES

FOURTH: If a foreign corporation, the address of its principal office in the state or country under the laws of which it is incorporated is

FIFTH: The character of the business in which it is actually engaged in Rhode Island, briefly stated, is

CEMETERY

SIXTH: The names and respective addresses of its directors and officers are:

Name	Office	Address
Mrs. Paul A. Cullens	Director	4E Heritage Village, Southbury Ct 06488
S. R. Robinson III	Director	96 Crafts Rd., Chestnut Hill MA 02167
Ruth S. Robinson	Director	1509 25th Ave, Vero Beach Fla 32960
John R. Robinson, Esq.	Director	Sunset Lane, Rye NY 10580
	Director	
S. R. Robinson III	President	96 Crafts Rd., Chestnut Hill MA 02167
John R. Robinson, Esq.	Vice President	Sunset Lane, Rye NY 10580
Ruth S. Robinson	Secretary	1509 25th Ave, Vero Beach Fla 32960
Ruth S. Robinson	Treasurer	1509 25th Ave, Vero Beach Fla 32960

SEVENTH: The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class	3	Series	Par Value per Share or Statement that Shares are without Par Value
200	Capital	1379	--	\$25 par value

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MAR 13 1979

*[Handwritten signature]*

EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

<u>Number of Shares</u>	<u>Class</u>	<u>Series</u>	<u>Par Value per Share or Statement that Shares are without Par Value</u>
87	-	-	\$25 par value

Dated February 23, 19 79

RIVERSIDE CEMETERY ASSOCIATION

(NAME OF CORPORATION)

By S.R. Robinson III  
Its President *by B. Birds*

Filing fee: \$15.00

To be filed annually  
between January 1st and March 1st

**State of Rhode Island and Providence Plantations**

**OFFICE OF THE SECRETARY OF STATE**

**ANNUAL REPORT**

**OF**

**RIVERSIDE CEMETERY ASSOCIATION**

Pursuant to the provisions of Section 7-1.1-118 of the General Laws, 1956, as amended, the undersigned corporation hereby submits the following annual report:

FIRST: The name of the corporation is RIVERSIDE CEMETERY ASSOCIATION

SECOND: It is incorporated under the laws of RHODE ISLAND

THIRD: The address of its registered office in Rhode Island is PO Box 16, Wakefield RI 02880

and the name of its registered agent in Rhode Island at such address is Robert B. Gates, 66 Silver Lake Avenue, Wakefield 02879

FOURTH: If a foreign corporation, the address of its principal office in the state or country under the laws of which it is incorporated is

FIFTH: The character of the business in which it is actually engaged in Rhode Island, briefly stated, is Cemetery

SIXTH: The names and respective addresses of its directors and officers are:

Name	Office	Address
Mrs. Paul A. Cullens	Director	4E Heritage Village, Southbury Conn 06498
S. R. Robinson III	Director	96 Crafts Road, Chestnut Hill Mass 02167
Ruth S. Robinson	Director	1509 25th Ave., Vero Beach, Florida 32960
John R. Robinson Esq	Director	Sunset Lane, NYC NY 10580
	Director	
	Director	
S. R. Robinson III	President	96 Crafts Road, Chestnut Hill Mass 02167
	Vice President	
Ruth S. Robinson	Secretary	1509 25th Ave., Vero Beach, Florida 32960
" " "	Treasurer	" " " " " " "

SEVENTH: The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class	3 29 78	Series	Par Value per Share or Statement that Shares are without Par Value
200	Capital		---	\$25

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APR 13 1978



EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class	Series	Par Value per Share or Statement that Shares are without Par Value
87	---	---	\$25

Dated February 28, 1978

RIVERSIDE CEMETERY ASSOCIATION

(NAME OF CORPORATION)

By

*Linne R. Robinson*

Its President

Filing fee: \$15.00

To be filed annually  
between January 1st and March 1st

# State of Rhode Island and Providence Plantations

## OFFICE OF THE SECRETARY OF STATE

### ANNUAL REPORT

OF

#### RIVERSIDE CEMETERY ASSOCIATION

Pursuant to the provisions of Section 7.1.1-118 of the General Laws, 1956, as amended, the undersigned corporation hereby submits the following annual report:

FIRST: The name of the corporation is RIVERSIDE CEMETERY ASSOCIATION

SECOND: It is incorporated under the laws of RHODE ISLAND

THIRD: The address of its registered office in Rhode Island is Gooseberry Road  
Post Office Box 16, Wakefield, R. I. 02880  
and the name of its registered agent in Rhode Island at such address is Robert B. Gates  
66 Silver Lake Ave., Wakefield, R. I. 02879

FOURTH: If a foreign corporation, the address of its principal office in the state or country under the laws of which it is incorporated is \_\_\_\_\_

FIFTH: The character of the business in which it is actually engaged in Rhode Island, briefly stated, is Cemetery

SIXTH: The names and respective addresses of its directors and officers are:

Name	Office	Address
Mrs. Paul A. Cullens	Director	4E Heritage Village, Southbury, Conn 06488
S. R. Robinson III	Director	96 Crafts Road, Chestnut Hill, Mass. 02167
Ruth S. Robinson	Director	Gooseberry Road, Wakefield, R. I. 02880
S. R. Robinson, Jr.	Director	Gooseberry Road, Wakefield, R. I. 02880
	Director	
	Director	
S. R. Robinson, III	President	96 Crafts Road, Chestnut Hill, Mass. 02167
	Vice President	
Ruth S. Robinson	Secretary	Gooseberry Road, Wakefield, R. I. 02880
S. R. Robinson, Jr.	Treasurer	Gooseberry Road, Wakefield, R. I. 02880

SEVENTH: The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class	Series	Par Value per Share or Statement that Shares are without Par Value
200	Capital		\$25.00 Par Value

EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

<u>Number of Shares</u>	<u>Class</u>	<u>Series</u>	<u>Par Value per Share or Statement that Shares are without Par Value</u>
87			\$25.00 Par Value

Dated February 14, 1977

RIVERSIDE CEMETERY ASSOCIATION

(NAME OF CORPORATION)

By

*Samuel R. Robinson*

Its President

Filing fee: \$15.00

To be filed annually  
between January 1st and March 1st

**State of Rhode Island and Providence Plantations**  
**OFFICE OF THE SECRETARY OF STATE**  
**ANNUAL REPORT**  
**OF**

RIVERSIDE CEMETERY ASSOC.

Pursuant to the provisions of Section 7-1.1-118 of the General Laws, 1956, as amended, the undersigned corporation hereby submits the following annual report:

FIRST: The name of the corporation is RIVERSIDE CEMETERY ASSOCIATION

SECOND: It is incorporated under the laws of RHODE ISLAND

THIRD: The address of its registered office in Rhode Island is GOOSBERRY ROAD  
POST OFFICE BOX 16, WAKEFIELD, R. I. 02880

and the name of its registered agent in Rhode Island at such address is ROBERT B. GATES  
66 SILVER LAKE AVE., WAKEFIELD, R. I. 02879

FOURTH: If a foreign corporation, the address of its principal office in the state or country under the laws of which it is incorporated is \_\_\_\_\_

FIFTH: The character of the business in which it is actually engaged in Rhode Island, briefly stated, is CEMETERY

SIXTH: The names and respective addresses of its directors and officers are:

Name	Office	Address
Mrs. Paul A. Cullens	Director	4E Heritage Village, Southbury, Conn. 06488
S. R. Robinson III	Director	96 Crafts Rd, Chestnut Hill, Mass. 0216
Ruth S. Robinson	Director	Gooseberry Rd. Wakefield, R. I. (Box 16) 02880
S R Robinson Jr.	Director	Gooseberry Rd. Wakefield, R. I. (Box 16) 02880
	Director	
	Director	
S. R. Robinson Jr.	President	Gooseberry Rd. Wakefield, R. I. (02880 Box 16)
	Vice President	
Ruth S. Robinson	Secretary	Gooseberry Rd. Wakefield, R. I. (02880 Box 16)
S R Robinson Jr.	Treasurer	Gooseberry Rd. Wakefield, R.I. (02880 Box 16)

SEVENTH: The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class	Series	Par Value per Share or Statement that Shares are without Par Value
200	Capital		\$25 Par Value

APR 13 1976

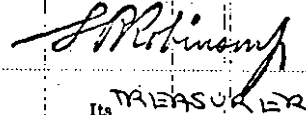
EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

<u>Number of Shares</u>	<u>Class</u>	<u>Series</u>	<u>Par Value per Share or Statement that Shares are without Par Value</u>
87			\$25 - Par Value

Dated 4/11, 1976

Riverside Cemetery Assoc.  
(NAME OF CORPORATION)

By

  
Its TREASURER

Filing fee: \$15.00

To be filed annually  
between January 1st and March 1st

**State of Rhode Island and Providence Plantations**  
**OFFICE OF THE SECRETARY OF STATE**

**ANNUAL REPORT  
OF**

RIVERSIDE CEMETERY ASSOCIATION

Pursuant to the provisions of Section 7-1.1-118 of the General Laws, 1956, as amended, the undersigned corporation hereby submits the following annual report:

FIRST: The name of the corporation is RIVERSIDE CEMETERY ASSOCIATION

SECOND: It is incorporated under the laws of RHODE ISLAND

THIRD: The address of its registered office in Rhode Island is  
PO Box 16, Wakefield, Rhode Island

and the name of its registered agent in Rhode Island at such address is Robert B. Gates,  
1309 Turks Head Building, Providence, RI 02903

FOURTH: If a foreign corporation, the address of its principal office in the state or country under the laws of which it is incorporated is

FIFTH: The character of the business in which it is actually engaged in Rhode Island, briefly stated, is CEMETERY

SIXTH: The names and respective addresses of its directors and officers are:

Name	Office	Address
S. RODMAN ROBINSON, JR.	Director	GOOSEBERRY ROAD WAKEFIELD RI
RUTH S. ROBINSON	Director	" " "
S. RODMAN ROBINSON III	Director	96 Craft Rd., Chestnut Hill, Mass.
	Director	
	Director	
S. RODMAN ROBINSON III	President	96 Craft Rd., Chestnut Hill, Mass.
	Vice President	
RUTH S. ROBINSON	Secretary	GOOSEBERRY ROAD, WAKEFIELD RI
S. RODMAN ROBINSON JR.	Treasurer	" " "

SEVENTH: The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class	Series	Par Value per Share or Statement that Shares are without Par Value
<del>XXX</del> 200	common		\$25 <del>XXX</del> par

JAN 28 1976

EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

<u>Number of Shares</u>	<u>Class</u>	<u>Series</u>	<u>Par Value per Share or Statement that Shares are without Par Value</u>
87	common		\$25 <del>xx</del> par

Dated January 20, 1976

RIVERSIDE CEMETERY ASSOCIATION

(NAME OF CORPORATION)

By



Its Treasurer

REC'D  
APR 14-76  
STATE  
15.00

Filing fee: \$15.00

To be filed annually  
between January 1st and March 1st

**State of Rhode Island and Providence Plantations**

**OFFICE OF THE SECRETARY OF STATE**

**ANNUAL REPORT**

**OF**

RIVERSIDE CEMETERY ASSOCIATION

Pursuant to the provisions of Section 7-1.1-118 of the General Laws, 1956, as amended, the undersigned corporation hereby submits the following annual report:

FIRST: The name of the corporation is RIVERSIDE CEMETERY ASSOCIATION

SECOND: It is incorporated under the laws of RHODE ISLAND

THIRD: The address of its registered office in Rhode Island is

P. O. BOX 16, Wakefield, R. I. 02880

and the name of its registered agent in Rhode Island at such address is

ROBERT B. GATES, 1309 TURKS HEAD BUILDING, PROVIDENCE, R. I. 02903

FOURTH: If a foreign corporation, the address of its principal office in the state or country under the laws of which it is incorporated is

FIFTH: The character of the business in which it is actually engaged in Rhode Island, briefly stated, is cemetary

SIXTH: The names and respective addresses of its directors and officers are:

Name	Office	Address
S. Rodman Robinson, Jr.	Director	P. O. Box 16, Wakefield, R.I.
Ruth S. Robinson	Director	" " " "
S. Rodman Robinson, III	Director	96 Craft Rd., Chestnut Hill, Mass.
	Director	
	Director	
S. Rodman Robinson, III	President	96 Craft Rd., Chestnut Hill, Mass.
	Vice President	
Ruth S. Robinson	Secretary	P. O. Box 16, Wakefield, R.I.
S. Rodman Robinson	Treasurer	P. O. Box 16, Wakefield, R. I.

SEVENTH: The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class	Series	Par Value per Share or Statement that Shares are without Par Value
200	<del>unpaid</del> Common	—	<del>\$25</del> par value no

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EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

<u>Number of Shares</u>	<u>Class</u>	<u>Series</u>	<u>Par Value per Share or Statement that Shares are without Par Value</u>
87	no par common	—	no par

Dated February 26, 19 74

RIVERSIDE CEMETERY ASSOCIATION

(NAME OF CORPORATION)

By

*J. Robinson*

Its Treasurer

PR 30-74 SEC-OF STATE 7182 AR\*\*\*15.00

Filing fee: \$15.00

To be filed annually  
between January 1st and March 1st

**State of Rhode Island and Providence Plantations**

**OFFICE OF THE SECRETARY OF STATE**

**ANNUAL REPORT**

**OF**

**RIVERSIDE CEMETERY ASSOCIATION**

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200	capital		\$25 par value

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<u>Number of Shares</u>	<u>Class</u>	<u>Series</u>	<u>Par Value per Share or Statement that Shares are without Par Value</u>
87	capital		no par

Dated.....February 1....., 1973..

RIVERSIDE CEMETERY ASSOCIATION  
(NAME OF CORPORATION)

By

*J. Robinson*

Treasurer

*J. Robinson*

MAR 15-73 SEC. OF STATE 129 AR \*\*\* 15.00