



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. 13346		2. Name of Corporation Mutual Benefit Productions, Inc.			
3. Street Address Principal Business Office c/o Murray & Gaunt Partners, 101 Park Ave. 2601		City NY		State NY	Zip 10178
4. Business Phone No. 212-986-7605		5. State of Incorporation RHODE ISLAND			6. SIC Code 9811
7. Brief Description of the Character of Business Conducted in Rhode Island THEATRE INVESTMENTS					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name James F. Murray			Vice President Name David H. Gaunt		
Street Address 5 Masterton Rd.			Street Address 993 Park Ave.		
City Bronxville	State NY	Zip 10708	City NY	State NY	Zip 10028
Secretary Name same			Treasurer Name David Gaunt (same)		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name James F. Murray			Director Name David H. Gaunt		
Street Address 5 Masterton Rd.			Street Address 993 Park Ave.		
City Bronxville	State NY	Zip 10708	City NY	State NY	Zip 10028
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) ☐			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
4,000 NO PAR VALUE			100	COMMON	NONE

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



13346

File Date	1-31-05
Check No.	1137
By:	YC
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: James F. Murray Date: 1/28/05
Print or Type Name of Officer: James F. Murray
Title of Officer: Pres.



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. 13346		2. Name of Corporation Mutual Benefit Productions, Inc.			
3. Street Address - Principal Business Office 101 Park Ave.		City NY		State NY	Zip 10178
4. Business Phone No. 212-986-7605		5. State of Incorporation RHODE ISLAND			6. SIC Code 9811
7. Brief Description of the Character of Business Conducted in Rhode Island THEATRE INVESTMENTS					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name James F. Murray			Vice President Name David H. Gaunt		
Street Address 101 Park Ave.			Street Address 101 Park Ave.		
City NY	State NY	Zip 10178	City NY	State NY	Zip 10178
Secretary Name James F. Murray			Treasurer Name David H. Gaunt		
Street Address 101 Park Ave.			Street Address 101 Park Ave.		
City NY	State NY	Zip 10178	City NY	State NY	Zip 10178
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name James F. Murray			Director Name David H. Gaunt		
Street Address 101 Park Ave.			Street Address 101 Park Ave.		
City NY	State NY	Zip 10178	City NY	State NY	Zip 10178
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) ☐			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
4,000 NO PAR VALUE			100	Common	0

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



* 1 3 3 4 6 *

File Date	1-26-04
Check No.	1112
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.

James F. Murray / 23/04
Signature of Officer Date
James F. Murray
Print or Type Name of Officer
Pres.
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. 13346
2. Name of Corporation Mutual Benefit Productions, Inc.
3. Street Address Principal Business Office 101 Park Ave. 25th Fl.
4. Business Phone No. 212-986-7605
5. State of Incorporation RHODE ISLAND

City NY State NY Zip 10178
6. SIC Code 9811

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

Theatre Investments

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

President Name James F. Murray
Street Address 101 Park Ave. Fl. 25
City NY State NY Zip 10178

Vice President Name David H. Gaunt
Street Address 101 Park Ave. Fl. 25
City NY State NY Zip 10178

Secretary Name James F. Murray
Street Address 101 Park Ave. Fl. 25
City NY State NY Zip 10178

Treasurer Name David H. Gaunt
Street Address 101 Park Ave. Fl. 25
City NY State NY Zip 10178

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

Director Name James F. Murray
Street Address 101 Park Ave. Fl. 25
City NY State NY Zip 10178

Director Name David H. Gaunt
Street Address 101 Park Ave. Fl. 25
City NY State NY Zip 10178

Director Name
Street Address
City State Zip

Director Name
Street Address
City State Zip

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

AUTHORIZED SHARES

Number of Shares	Class/Series	Par Value
4,000	NO PAR VALUE	

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

ISSUED SHARES

Number of Shares	Class/Series	Par Value
100	COMMON	0

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



* 1 3 3 4 6 *

File Date: 2-18-03
Check No.: 1087
By: 100

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 James F. Murray
Signature of Officer Date
James F. Murray
Print or Type Name of Officer

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. 13346 2. Name of Corporation Mutual Benefit Productions, Inc.
3. Street Address Principal Business Office
101 Park Ave., 25th FL.
4. Business Phone No. 212-986-7605 5. State of Incorporation RHODE ISLAND

City New York State NY Zip 10178
6. SIC Code 9811

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

Theatre Investments

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

President Name James F. Murray
Street Address 101 Park Ave. FL. 25
City NYC State NY Zip 10178
Secretary Name James F. Murray
Street Address Same
City _____ State _____ Zip _____

Vice President Name David H. Gaunt
Street Address 101 Park Ave. FL. 25
City NYC State NY Zip 10178
Treasurer Name David H. Gaunt
Street Address Same
City _____ State _____ Zip _____

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

Director Name James F. Murray
Street Address 101 Park Ave. FL. 25
City NYC State NY Zip 10178
Director Name _____
Street Address _____
City _____ State _____ Zip _____

Director Name David H. Gaunt
Street Address 101 Park Ave. FL. 25
City NYC State NY Zip 10178
Director Name _____
Street Address _____
City _____ State _____ Zip _____

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

AUTHORIZED SHARES

Number of Shares 4,000 NO PAR VALUE Class/Series _____ Par Value _____

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

ISSUED SHARES

Number of Shares 100 shares Class/Series Common Par Value 0

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



* 1 3 3 4 6 *

File Date: 1-22-02

Check No.: 1069

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 James F. Murray 1/18/02
Signature of Officer Date

James F. Murray
Print or Type Name of Officer

President
Title of Officer



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.

13346

2. Name of Corporation

Mutual Benefit Productions, Inc.

3. Street Address Principal Business Office

40 Murray + Gaunt Partners,

101 Park Ave., City

25th FL.

New York

State

NY

Zip

10178

4. Business Phone No.

212-986-7605

5. State of Incorporation

RHODE ISLAND

6. SIC Code

9811

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

Theatre Investments

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

FILL IN SPACES BEFORE USING ATTACHMENTS

President Name

James F. Murray

Street Address

40 Murray + Gaunt Partners

101 Park Ave., FL. 25

City

New York

State

NY

Zip

10178

Secretary Name

James F. Murray

Street Address

Same

City

State

Zip

Vice President Name

David H. Gaunt

Street Address

40 Murray + Gaunt Partners

101 Park Ave., FL. 25

City

New York

State

NY

Zip

10178

Treasurer Name

David H. Gaunt

Street Address

Same

City

State

Zip

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

FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name

James F. Murray

Street Address

40 Murray + Gaunt Partners,

101 Park Ave.

FL. 25

City

New York

State

NY

Zip

10178

Director Name

Director Name

David H. Gaunt

Street Address

40 Murray + Gaunt Partners

101 Park Ave., FL. 25

City

New York

State

NY

Zip

10178

Street Address

Street Address

City

State

Zip

City

State

Zip

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

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

4,000 SHS NO PAR VAL

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

ISSUED SHARES

Number of Shares

Class/Series

Par Value

100 shares

Common

0

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



* 1 3 3 4 6 *

File Date: FILED

Check No.: FEB 05 2001

By: James F. Murray

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 James F. Murray Date 2/2/01

Print or Type Name of Officer James F. Murray

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
401-222-3040



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. 13346	2. Name of Corporation Mutual Benefit Productions, Inc.
3. Street Address Principal Business Office c/o Murray & Gaunt Partners, 101 Park Ave., 25th FL., New York, NY 10178	4. Business Phone No. 212-986-7605
5. State of Incorporation RHODE ISLAND	6. SIC Code 9811

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

Theatre Investments

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

President Name James F. Murray			Vice President Name David H. Gaunt		
Street Address c/o Murray & Gaunt Partners, 101 Park Ave., FL. 25	City NY	State NY	Street Address c/o Murray & Gaunt Partners, 101 Park Ave., FL. 25	City NY	State NY
Zip 10178			Zip 10178		
Secretary Name James F. Murray			Treasurer Name David H. Gaunt		
Street Address Same	City NY	State NY	Street Address Same	City NY	State NY
Zip 10178			Zip 10178		

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

Director Name James F. Murray			Director Name David H. Gaunt		
Street Address c/o Murray & Gaunt Partners, 101 Park Ave., FL. 25	City NY	State NY	Street Address c/o Murray & Gaunt Partners, 101 Park Ave., FL. 25	City NY	State NY
Zip 10178			Zip 10178		
Director Name James F. Murray			Director Name David H. Gaunt		
Street Address Same	City NY	State NY	Street Address Same	City NY	State NY
Zip 10178			Zip 10178		

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

Number of Shares	Class/Series	Par Value
4,000 SHS NO PAR VAL		

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

Number of Shares	Class/Series	Par Value
100 Shares	Common	

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



* 1 3 3 4 6 *

File Date: **5/26/00**
Check No.: **1041**
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 of Officer: **James F. Murray** Date: **5/22/00**
Print or Type Name of Officer: **James F. Murray**
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
401-222-3040

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

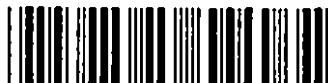
Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)



1. Corporate ID No. 13348		2. Name of Corporation Mutual Benefit Productions, Inc.	
3. Street Address Principal Business Office c/o Murray & Grant Partners 101 Park Ave		City N.Y.	State N.Y.
4. Business Phone No. 212-936-7605		5. State of Incorporation RHODE ISLAND	
6. SIC Code 9811		7. Brief Description of the Character of Business Conducted in Rhode Island Theatre Investments	
8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name James F. Murray		Vice President Name David H. Grant	
Street Address 5 Masterton Rd.		Street Address 993 Park Ave	
City Bronxville	State N.Y.	City N.Y.	State N.Y.
Zip 10708		Zip 10028	
Secretary Name James F. Murray		Treasurer Name David H. Grant	
Street Address Same		Street Address Same	
City 	State 	City 	State
Zip 		Zip 	
9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS			
Director Name James F. Murray		Director Name David H. Grant	
Street Address 5 Masterton Rd.		Street Address 993 Park Ave	
City Bronxville	State N.Y.	City N.Y.	State N.Y.
Zip 10708		Zip 10028	
Director Name 		Director Name 	
Street Address 		Street Address 	
City 	State 	City 	State
Zip 		Zip 	
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)			
AUTHORIZED SHARES			
Number of Shares	Class/Series	Par Value	
4,000 SHS NO PAR VAL			
11. SHARES ISSUED ("X" BOX FOR ATTACHMENT)			
ISSUED SHARES			
Number of Shares	Class/Series	Par Value	
100 Shares	Common		

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



* 1 3 3 4 6 *

File Date: **Mar 4, 1999**

Check No.: **1011**

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 of Officer: **James F. Murray** Date: **1/23/99**

Print or Type Name of Officer: **James F. Murray**

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 FOR THE YEAR 1998
Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.		2. Name of Corporation	
13348		Mutual Benefit Productions, Inc.	
3. Street Address Principal Business Office		City	State
520 Broad Street		Newark	N.J.
4. Business Phone No.		5. State of Incorporation	
973-481-8169		RHODE ISLAND	
7. Brief Description of the Character of Business Conducted in Rhode Island		6. SIC Code	
General partner to limited partnerships		9811	
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT)			
President Name		Vice President Name	
Yvonne M. Compitello		Michael S. Ryan	
Street Address		Street Address	
520 Broad Street		520 Broad Street	
City	State	City	State
Newark	N.J.	Newark	N.J.
Zip	07102	Zip	07102
Secretary Name		Treasurer Name	
David Riley		Nick Saccomondo, Jr.	
Street Address		Street Address	
520 Broad Street		520 Broad Street	
City	State	City	State
Newark	N.J.	Newark	N.J.
Zip	07102	Zip	07102
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT)			
Director Name		Director Name	
Yvonne C. Compitello		Michael S. Ryan	
Street Address		Street Address	
520 Broad Street		520 Broad Street	
City	State	City	State
Newark	N.J.	Newark	N.J.
Zip	07102	Zip	07102
Director Name		Director Name	
Preston G. Hansen			
Street Address		Street Address	
520 Broad Street			
City	State	City	State
Newark	N.J.		
Zip	07102		
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)		11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)	
AUTHORIZED SHARES		ISSUED SHARES	
Number of Shares	Class/Series	Number of Shares	Class/Series
4,000 SHS NO PAR VAL		100 shares	common
Par Value			

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



File Date: 2-17-98
Check No.: 285
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.

Yvonne M. Compitello 2/12/98
Signature of Officer Date
Yvonne M. Compitello
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 1997

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 13346		2. Name of Corporation Mutual Benefit Productions, Inc.	
3. Street Address Principal Business Office 520 Broad Street		City Newark	State N.J.
4. Business Phone No. 201-481-8169		5. State of Incorporation RHODE ISLAND	
6. SIC Code 9811		7. Brief Description of the Character of Business Conducted in Rhode Island General partner to limited partnerships	
8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT)			
President Name Yvonne M. Compitello		Vice President Name Michael S. Ryan	
Street Address 520 Broad Street		Street Address 520 Broad Street	
City Newark	State N.J.	City Newark	State N.J.
Secretary Name Eugene J. Ciarkowski		Treasurer Name Thomas Morgan	
Street Address 520 Broad Street		Street Address 520 Broad Street	
City Newark	State NJ	City Newark	State N.J.
9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT)		9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT)	
Director Name Yvonne M. Compitello		Director Name Michael S. Ryan	
Street Address 520 Broad Street		Street Address 520 Broad Street	
City Newark	State N.J.	City Newark	State N.J.
Director Name Eugene J. Ciarkowski		Director Name Eugene J. Ciarkowski	
Street Address 520 Broad Street		Street Address 520 Broad Street	
City Newark	State NJ	City Newark	State NJ
10. SHARES AUTHORIZED AND ISSUED ("X" BOX FOR ATTACHMENT)		10. SHARES AUTHORIZED AND ISSUED ("X" BOX FOR ATTACHMENT)	
AUTHORIZED SHARES		ISSUED SHARES	
Number of Shares	Class/Series	Number of Shares	Class/Series
4,000 SHS NO PAR VAL		100 shares	common

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



File Date: 1/24/97

Check No.: 157

By: GAA/WE

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.

Yvonne M. Compitello 1/22/97
Signature of Officer Date

Yvonne M. Compitello
Print or Type Name of Officer

President

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. 13346		2. NAME OF CORPORATION Mutual Benefit Productions, Inc.			
3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE 520 Broad Street		CITY Newark		STATE N.J.	ZIP CODE 07102
4. BUSINESS PHONE NO. 201-481-8169		5. STATE OF INCORPORATION RHODE ISLAND			6. SIC CODE 9811
7. BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE ISLAND General partner to limited partnerships					
8. NAMES AND ADDRESSES OF THE OFFICERS					
PRESIDENT NAME Yvonne M. Compitello			VICE PRESIDENT NAME Michael S. Ryan		
STREET ADDRESS 520 Broad Street			STREET ADDRESS 520 Broad Street		
CITY Newark	STATE N.J.	ZIP CODE 07102	CITY Newark	STATE N.J.	ZIP CODE 07102
SECRETARY NAME Eugene J. Ciarkowski			TREASURER NAME Thomas Morgan		
STREET ADDRESS 520 Broad Street			STREET ADDRESS 520 Broad Street		
CITY Newark	STATE N.J.	ZIP CODE 07102	CITY Newark	STATE N.J.	ZIP CODE 07102
9. NAMES AND ADDRESSES OF THE DIRECTORS					
DIRECTOR NAME Yvonne M. Compitello			DIRECTOR NAME Michael S. Ryan		
STREET ADDRESS 520 Broad Street			STREET ADDRESS 520 Broad Street		
CITY Newark	STATE N.J.	ZIP CODE 07102	CITY Newark	STATE N.J.	ZIP CODE 07102
DIRECTOR NAME Eugene J. Ciarkowski			DIRECTOR NAME Michael S. Ryan		
STREET ADDRESS 520 Broad Street			STREET ADDRESS 520 Broad Street		
CITY Newark	STATE N.J.	ZIP CODE 07102	CITY Newark	STATE N.J.	ZIP CODE 07102
10. SHARES AUTHORIZED AND ISSUED					
AUTHORIZED SHARES			ISSUED SHARES		
NUMBER OF SHARES	CLASS / SERIES	PAR VALUE	NUMBER OF SHARES	CLASS / SERIES	PAR VALUE
4,000 SHS NO PAR VAL			100 shares	COMMON	

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:

2/23/96

Check No:

129

By:

[Signature]

[Signature]
Signature of Officer

Yvonne M. Compitello

Print or Type Name of Officer

President

Title of Officer

1/31/96

Date

For Secretary of State Use Only



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

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.

Corporate ID: 13346 Annual Report for the year: 1995

Name of Corporation: Mutual Benefit Productions, Inc.

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

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

Mutual Benefit Productions, Inc.

520 Broad Street

Newark, N.J. 07102

Phone: (201) 481-7813

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

Mutual Benefit Productions, Inc.

1275 Wampanoag Trail

East Providence, R.I. 02915

Phone: (401) 437-9098

Business Entity is (check one):

☒ Business Corporation (See RIGL Chapter 7-1.1)

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

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

To purchase, hold, sell and otherwise
invest in painting, sculptures, and other
works of art; to act as sponsor for and
otherwise invest in theatre and film art
and other related programs.

THE NAMES OF THE OFFICERS ARE:

RESIDENT	STREET ADDRESS	CITY/STATE	ZIP CODE
Yvonne M. Compitello	520 Broad Street	Newark, N.J.	07102
VICE PRESIDENT	STREET ADDRESS	CITY/STATE	ZIP CODE
Robert J. Peterson	1275 Wampanoag Trail	East Providence, R.I.	02915
SECRETARY	STREET ADDRESS	CITY/STATE	ZIP CODE
Eugene J. Ciarkowski	520 Broad Street	Newark, N.J.	07102
TREASURER	STREET ADDRESS	CITY/STATE	ZIP CODE
Vacancy			

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
Yvonne M. Compitello	520 Broad Street	Newark, N.J.	07102
NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
Eugene J. Ciarkowski	520 Broad Street	Newark, N.J.	07102
NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
Michael S. Ryan	520 Broad Street	Newark, N.J.	07102

NUMBER OF SHARES AUTHORIZED (Rider may be attached)

Number of Shares	Class / Series
4,000	Common

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

Number of Shares	Class / Series
------------------	----------------

Date: August 24, 1995

By:

Yvonne M. Compitello

PRINT OR TYPE NAME OF OFFICER SIGNING

President and Director

TITLE OF OFFICER SIGNING

DESIGNATED REGISTERED AGENT FOR SERVICE OF PROCESS:

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

PAID
OCT 25 1995
SECY OF STATE

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

1219362
\$50 7/3
File Annually
LLC: Sept. 1 - Nov. 1
CORP: Jan. 1 - March 1

Corporate ID: 0013346 Annual Report for the year: 1994
Mutual Benefit Productions, Inc.

Business entity organized under the laws of the State of: R.I.
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):
1275 Wampanoag Trail
E. Providence RI 02915
Phone: (401) 437-9098

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:
Eugene J. Ciarkowski
Secretary
520 Broad Street
Newark NJ 07102-3184
Brief statement of the character of business conducted in Rhode Island:
General partner to limited partner-ships
Date of Organization: 2/23/83
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
☐ CHIEF EXECUTIVE OFFICER OR ☒ PRESIDENT (Check One) Thomas P. Lydon, Jr.	520 Broad Street	Newark NJ	07102-3184
☐ CHIEF OPERATING OFFICER OR ☒ VICE PRESIDENT (Check One) Robert J. Peterson Sr	1275 Wampanoag Trail	E. Providence RI	02915
☐ CUSTODIAN OF RECORDS OR ☒ SECRETARY (Check One) Eugene J. Ciarkowski	520 Broad Street	Newark NJ	07102-3184
☐ CHIEF FINANCIAL OFFICER OR ☒ TREASURER (Check One) William A. Finelli	520 Broad Street	Newark NJ	07102-3184

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
Thomas P. Lydon, Jr.	520 Broad Street	Newark NJ	07102-3184
Michael S. Ryan	520 Broad Street	Newark NJ	07102-3184
Eugene J. Ciarkowski	520 Broad Street	Newark NJ	07102-3184

NUMBER OF SHARES AUTHORIZED (If Applicable) NUMBER 4,000 CLASS Common SERIES PAR VALUE OR WITHOUT PAR Without Par	NUMBER OF SHARES ISSUED AND OUTSTANDING (If Applicable) NUMBER CLASS SERIES PAR VALUE OR WITHOUT PAR
---	--

APR 18 1994
[Signature]
By: [Signature]

Filing Fee \$50.00

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

11637B
State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID.....001334E..... Annual Report for the year.....1993.....

FIRST: The name of the corporation is.....Mutual Benefit Productions, Inc.....

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

THIRD: Character of business, briefly stated, is.....investment in theatrical productions.....
and any lawful business.....

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

FIFTH: Business address in Rhode Island.....290 Westminster Street, Providence, RI 02903.....

SIXTH: Names and addresses of its directors and officers:

(Attach rider if necessary)

Name

Office

Address (including number, street, zip code)

see attached..... Director

Director

Director

President

Vice President

Secretary

Treasurer

SEVENTH: Number of Shares authorized:

No. of Shares

Class

Series

Par Value
or statement that
shares are without
par value

8000

common

PAID

\$1.00

EIGHTH: Number of Shares issued:

No. of Shares

Class

Series

Par Value
or statement that
shares are without
par value

100

common

\$1.00

Dated February 11 19 93

Mutual Benefit Productions, Inc.
(Name of Corporation)

By

Title Assistant Secretary

(Report must be signed by an officer)

Mutual Benefit Productions, Inc.

Officers and Directors

Michael S. Ryan, President and Director
520 Broad Street, Newark, NJ 07102-3184

William A. Finelli, Treasurer
520 Broad Street, Newark, NJ 07102-3184

Eugene J. Ciarkowski, Secretary
520 Broad Street, Newark, NJ 07102-3184

Betsy Russell Hickey, Assistant Secretary
290 Westminster Street, Providence, RI 02903

Robert J. Peterson, Assistant Secretary
290 Westminster Street, Providence, RI 02903

Thomas P. Lydon, Jr., Director
520 Broad Street, Newark, NJ 07102-3184

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 13346 Annual Report for the year 1992

FIRST: The name of the corporation is Mutual Benefit Productions, Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is investment in theatrical productions and
any lawful business.

FOURTH: If foreign corporation, address of its principal office

N/A

FIFTH: Business address in Rhode Island

290 Westminster Street Providence RI 02903

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

Name

Office

Address (including number, street, zip code)

SEE ATTACHED LIST Director

Director

Director

SEE ATTACHED President

Vice President

Secretary

Treasurer

SEVENTH: Number of Shares authorized:

No. of Shares
8000

Class
Common

Series
PAID

Par Value
or statement that
shares are without
par value
\$ 1.00

MAY 04 1992

EIGHTH: Number of Shares issued:

No. of Shares
100

Class
Common

Series

Par Value
or statement that
shares are without
par value
\$ 1.00

SECY OF STATE

Dated March 16, 19 92

Mutual Benefit Productions, Inc.
(Name of Corporation)

By [Signature]

Title Assistant Secretary

(Report must be signed by an officer)

MUTUAL BENEFIT PRODUCTIONS, INC.

Michael S. Ryan - Vice President - 520 Broad Street, Newark, NJ 07102-3184

Eugene J. Ciarkowski - Secretary - 520 Broad Street, Newark, NJ 07102-3184

William A. Finelli - Treasurer - 520 Broad Street, Newark, NJ 07102-3184

Betsy R. Hickey - Assistant Secretary - 290 Westminster St., Providence, RI 02903

Robert J. Peterson - Assistant Secretary - 290 Westminster St., Providence, RI 02903

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.....13346..... Annual Report for the year.....1991.....

FIRST: The name of the corporation is Mutual Benefit Productions, Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is to purchase hold, sell, sponsor and otherwise invest in works of art and theatre and film arts.

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

FIFTH: Business address in Rhode Island

290 Westminister Street Providence RI 02903

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

Name	Office	Address (including number, street, zip code)
<u>Henry E. Kates</u>	<u>Director</u>	<u>290 Westminister St., Providence, RI</u>
<u>Ted D. Simmons</u>	<u>Director</u>	<u>520 Broad Street, Newark, NJ</u>
	<u>Director</u>	
<u>SEE ATTACHED</u>	<u>President</u>	
	<u>Vice President</u>	
	<u>Secretary</u>	
	<u>Treasurer</u>	

SEVENTH: Number of Shares authorized:

No. of Shares	Class
<u>400</u>	<u>Common</u>

Par Value
or statement that
shares are without
par value
no par value

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series
<u>100</u>	<u>Common</u>	

Par Value
or statement that
shares are without
par value
no par value

Dated March 28 1991

Mutual Benefit Productions, Inc.
(Name of Corporation)

By Margaret D. Farrell

Title Asst. Secretary

(Report must be signed by an officer)

MUTUAL BENEFIT PRODUCTIONS, INC.

Officers

President	John F. Poblocki 290 Westminster Street Providence, RI 02903
Vice President	Ted D. Simmons 520 Broad Street Newark, NJ
Vice President	Michael Ryan 290 Westminster Street Providence, RI 02903
Treasurer	Charles J. Cardenti 290 Westminster Street Providence, RI 02903
Secretary	Steven J. Carlotti 520 Broad Street Newark, NJ
Assistant Secretary	Margaret D. Farrell 1500 Fleet Center Providence, RI 02903

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 13346 Annual Report for the year 1990

FIRST: The name of the corporation is Mutual Benefit Productions, Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is to purchase hold. sell. sponsor and otherwise invest in works of art and theatre and film arts.

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

FIFTH: Business address in Rhode Island
290 Westminister Street Providence RI 02903

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

Name	Office	Address (including number, street, zip code)
<u>Henry E. Kates</u>	<u>Director</u>	<u>290 Westminister St., Providence, RI</u>
<u>Ted D. Simmons</u>	<u>Director</u>	<u>520 Broad Street, Newark, NJ</u>
	<u>Director</u>	
<u>SEE ATTACHED</u>	<u>President</u>	
	<u>Vice President</u>	
	<u>Secretary</u>	
	<u>Treasurer</u>	

SEVENTH: Number of Shares authorized:

No. of Shares	Class
<u>400</u>	<u>COMMON</u>

Par Value
or statement that
shares are without
par value
no par value

Rec'd & Filed
Series
FEB 23 1990

EIGHTH: Number of Shares issued:

No. of Shares	Class
<u>100</u>	<u>COMMON</u>

Par Value
or statement that
shares are without
par value
no par value

Series

Dated 2/13 19 90

Mutual Benefit Productions, Inc.
(Name of Corporation)

By [Signature]

(Report must be signed by an officer)

Title

MUTUAL BENEFIT PRODUCTIONS, INC.

OFFICERS:

PRESIDENT:

Fred J. Franklin

290 Westminster St., Providence, RI 02903

VICE-PRESIDENT:

Ted D. Simmons

520 Broad Street, Newark, NJ

Elizabeth P. Williams

680 5th Ave., #1701, New York, NY 10019

SECRETARY:

Elizabeth P. Williams

680 5th Ave., #1701, New York, NY 10019

ASSISTANT SECRETARY:

Stephen J. Carlotti

1500 Fleet Center, Providence, RI 02903

Richard G. Small

1500 Fleet Center, Providence, RI 02903

Barbara Hedge

290 Westminster St., Providence, RI

TREASURER:

Charles J. Cardente

290 Westminster St., Providence, RI

1
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 13346 Annual Report for the year 1989 D ✓

FIRST: The name of the corporation is Mutual Benefit Productions, Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is to purchase hold, sell, sponsor and otherwise invest in works of art and theatre and film arts.

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

FIFTH: Business address in Rhode Island

290 Westminster Street Providence RI 02903

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

Name	Office	Address (including number, street, zip code)
<u>Henry E. Kates</u>	<u>Director</u>	<u>290 Westminster St., Providence, RI</u>
<u>Ted D. Simmons</u>	<u>Director</u>	<u>520 Broad Street, Newark, NJ</u>
	<u>Director</u>	
<u>SEE ATTACHED</u>	<u>President</u>	
	<u>Vice President</u>	
	<u>Secretary</u>	
	<u>Treasurer</u>	

RECEIVED
SECRETARY OF STATE
CORPORATIONS DIV.
JUL 13 12 10 PM '89

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
<u>400</u>	<u>common</u>		<u>no par value</u>

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
<u>100</u>	<u>common</u>		<u>no par value</u>

PAID
JUL 12 1989
Series

Dated 19 Mutual Benefit Productions, Inc.
(Name of Corporation)

By [Signature]
Title

(Report must be signed by an officer)

MUTUAL BENEFIT PRODUCTIONS, INC.

CORP.ID#: 13346

OFFICERS:

PRESIDENT:

Fred J. Franklin

290 Westminster St., Providence, RI 02903

VICE-PRESIDENT:

Ted D. Simmons

520 Broad Street, Newark, NJ

Elizabeth P. Williams

680 5th Ave., #1701, New York, NY 10019

SECRETARY:

Elizabeth P. Williams

680 5th Ave., #1701, New York, NY 10019

ASSISTANT SECRETARY:

Stephen J. Carlotti

1500 Fleet Center, Providence, RI 02903

Richard G. Small

1500 Fleet Center, Providence, RI 02903

Barbara Hedge

290 Westminster St., Providence, RI

TREASURER:

Charles J. Cardente

290 Westminster St., Providence, RI

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.....13346..... Annual Report for the year.....1988.....

FIRST: The name of the corporation is.....Mutual Benefit Productions, Inc.....

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

THIRD: Character of business, briefly stated, is.....to purchase hold, sell, sponsor and
otherwise invest in works of art and theatre and film arts.....

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

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

.....290 Westminister Street Providence RI 02903.....

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

Name

Office

Address (including number, street, zip code)

.....Henry E. Kates..... Director290 Westminister St., Providence, RI

.....Ted D. Simmons..... Director520 Broad Street, Newark, NJ

..... Director

.....SEE ATTACHED..... President

..... Vice President

..... Secretary

..... Treasurer

SEVENTH: Number of Shares authorized:

No. of Shares

Class

Series

Par Value
or statement that
shares are without
par value

400

common

no par value

EIGHTH: Number of Shares issued:

No. of Shares

Class

Series

Par Value
or statement that
shares are without
par value

100

common

no par value

Dated..... 19

88. MAY 16

LI NRP

.....Mutual Benefit Productions, Inc.....
(Name of Corporation)

By.....

(Report must be signed by an officer)

Title.....

MUTUAL BENEFIT PRODUCTIONS, INC.

CORP.ID#: 13346

OFFICERS:

PRESIDENT:

Fred J. Franklin 290 Westminster St., Providence, RI 02903

VICE-PRESIDENT:

Ted D. Simmons 520 Broad Street, Newark, NJ

Elizabeth P. Williams 680 5th Ave., #1701, New York, NY 10019

SECRETARY:

Elizabeth P. Williams 680 5th Ave., #1701, New York, NY 10019

ASSISTANT SECRETARY:

Stephen J. Carlotti 1500 Fleet Center, Providence, RI 02903

Richard G. Small 1500 Fleet Center, Providence, RI 02903

Barbara Hedge 290 Westminster St., Providence, RI

TREASURER:

Charles J. Cardente 290 Westminster St., Providence, RI

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 13346 Annual Report for the year 1987

FIRST: The name of the corporation is Mutual Benefit Productions, Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is to purchase hold, sell, sponsor and otherwise invest in works of art and theatre and film arts.

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

FIFTH: Business address in Rhode Island

290 Westminster Street Providence RI 02903

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

Name

Office

Address (including number, street, zip code)

Henry E. Kates Director 290 Westminster St., Providence, RI

Ted D. Simmons Director 520 Broad Street, Newark, NJ

Director

SEE ATTACHED President

Vice President

Secretary

Treasurer

SEVENTH: Number of Shares authorized:

No. of Shares 400

Class Common

Par Value
or statement that
shares are without
par value
no par value

EIGHTH: Number of Shares issued:

No. of Shares 100

Class Common

Series

Par Value
or statement that
shares are without
par value
no par value

Dated 19 02/13/87 AMRE 15.00 CHEK 0213A001 15.00 Mutual Benefit Productions, Inc.

(Name of Corporation)

By

Title Assistant Secretary

(Report must be signed by an officer)

MUTUAL BENEFIT PRODUCTIONS, INC.

CORP.ID#: 13346

OFFICERS:

PRESIDENT:

Fred J. Franklin	290 Westminster St., Providence, RI 02903
------------------	---

VICE-PRESIDENT:

Ted D. Simmons	520 Broad Street, Newark, NJ
----------------	------------------------------

Elizabeth P. Williams	680 5th Ave., #1701, New York, NY 10019
-----------------------	---

SECRETARY:

Elizabeth P. Williams	680 5th Ave., #1701, New York, NY 10019
-----------------------	---

ASSISTANT SECRETARY:

Stephen J. Carlotti	1500 Fleet Center, Providence, RI 02903
---------------------	---

Richard G. Small	1500 Fleet Center, Providence, RI 02903
------------------	---

Barbara Hedge	290 Westminster St., Providence, RI
---------------	-------------------------------------

TREASURER:

Charles J. Cardente	290 Westminster St., Providence, RI
---------------------	-------------------------------------

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE, RHODE ISLAND 02903

Corporate ID.....13346..... Annual Report for the year.....1986.....

FIRST: The name of the corporation is.....Mutual Benefit Productions, Inc.....

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

THIRD: Character of business, briefly stated, is.....to purchase, hold, sell, sponsor and otherwise invest in works of art and theatre and film arts.....

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

N/A.....

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

290 Westminister Street Providence RI 02903.....

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

Name	Office	Address (including number, street, zip code)
Henry E. Kates	Director	290 Westminister St., Providence, RI
Ted D. Simmons	Director	520 Broad Street, Newark, NJ
	Director	
SEE ATTACHED	President	
	Vice President	
	Secretary	
	Treasurer	

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
400	common		no par value

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	common		no par value

PAID
APR 29 1986
SEC'Y. OF STATE
VR

Dated April 25, 19 86

Mutual Benefit Productions, Inc.
(Name of Corporation)

By *Chandler*
Fred J. Franklin
President

(Report must be signed by an officer)

Mutual Benefit Productions, Inc.

CORP ID# 13346

OFFICERS:

PRESIDENT:

Fred J. Franklin 290 Westminster St., Providence, RI

VICE-PRESIDENT:

Ted D. Simmons 520 Broad St., Newark, NJ

Elizabeth P. Willimas 680 5th Ave. #1701, NYC, NY 10019

SECRETARY:

Elizabeth P. Williams 680 5th Ave. #1701, NYC, NY 10019

ASSISTANT SECRETARY:

Stephen J. Carlotti 1500 Fleet Center, Providence, RI

Richard G. Small 1500 Fleet Center, Providence, RI

Barbara Hedge 290 Westminster St., Providence, RI

TREASURER:

Charles J. Cardente 290 Westminster St., Providence, RI

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 13346

Annual Report for the year 1985

FIRST: The name of the corporation is Mutual Benefit Productions, Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is to purchase, hold, sell, sponsor and otherwise invest in works of art and theater and film arts; and any lawful business.

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

FIFTH: Business address in Rhode Island 290 Westminister Street, Providence, RI 02903

SIXTH: Names and addresses of its directors and officers:

(Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
Henry E. Kates	Director	290 Westminister Street, Providence, RI
Karen W. Crane	Director	290 Westminister Street, Providence, RI
Ted D. Simmons	Director	520 Broad Street, Newark, NJ
Karen W. Crane	President	290 Westminister Street, Providence, RI
Ted D. Simmons	Vice President	520 Broad Street, Newark, NJ
Fred J. Franklin	Secretary	290 Westminister Street, Providence, RI
Stephen J. Carlotti	Asst. Sec.	2200 Fleet Nat'l Bk. Bldg., Providence, RI
Charles J. Cardente	Treasurer	290 Westminister Street, Providence, RI
Richard G. Small	Asst. Sec.	2200 Fleet Nat'l Bk., Bldg., Providence, RI

SEVENTH: Number of Shares authorized: 4,000

No. of Shares	Class	Series	Par Value or statement that shares are without par value
4,000	Common		No Par Value

EIGHTH: Number of Shares issued: 100

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	Common		No Par Value

Dated March 1, 1985

Mutual Benefit Productions, Inc.

(Name of Corporation)

By

Title Secretary

(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
OFFICE OF THE SECRETARY OF STATE

Annual Report for the year 1984

FIRST: The name of the corporation is MUTUAL BENEFIT PRODUCTIONS, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is To purchase, hold, sell, and otherwise invest in paintings, sculptures, and other works of art; to act as sponsor for and otherwise invest in theatre and film arts; and any other lawful business.

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

N/A

FIFTH: Business address in Rhode Island

290 Westminster Street, Providence, Rhode Island

SIXTH: Names and addresses of its directors and officers:

(Addresses must include street and number, if any)

Name	Office	Address
Henry E. Kates	Director	290 Westminster Street, Prov., RI
Karen W. Krane	Director	290 Westminster Street, Prov., RI
Ted D. Simmons	Director	520 Broad St., Newark, NJ
Karen W. Krane	President	290 Westminster Street, Prov., RI
Ted D. Simmons	Vice President	520 Broad St., Newark, NJ
Stephen J. Carlotti	Asst. Sec.	2200 Fleet Bank Bldg., Prov., RI
Fred J. Franklin	Secretary	290 Westminster Street, Prov., RI
Richard G. Small	Asst. Sec.	2200 Fleet Bank Bldg., Prov., RI
Robert J. Peterson	Treasurer	290 Westminster Street

(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
4000	Common		No Par Value

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	Common		No Par Value

Dated: 2/14 19 84

MUTUAL BENEFIT PRODUCTIONS, INC.

(Name of Corporation)

By [Signature]
Title Assistant Secretary

(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