



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

Annual Report for the year: 2020

Non-Profit Corporation

→ Filing period: June 1 - June 30

→ Filing Fee: \$20.00

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

FILED
MAY 27 2023
BY 1233
[Signature]

1. Entity ID Number 279321		2. Exact name of the Corporation International Police Square & Compass Club, Inc. Rhode Island			
3. State of Incorporation Rhode Island		5. Brief description of the character of business conducted in Rhode Island To provide the mutual assistance, enjoyment, education, and social benefit of its members, to promote Masonic Brotherhood and Charity. To develop a fraternal spirit among Masons. Law Enforcement and the General Public.			
4. NAICS Code 813211 - Grantmaking Founda					
6. Principal Office Address 761 Nooseneck Hill Road		City West Greenwich		State RI	Zip 02817
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐					
President Name Bradford L. Barco		Vice-President Name Raymond W. Cahoon, Jr.			
Street Address 761 Nooseneck Hill Road		Street Address 50 Hendricksen Court			
City West Greenwich	State RI	Zip 02817	City Warwick	State RI	Zip 02889
Secretary Name Daniel E. Lee		Treasurer Name John C. Beebe, III			
Street Address 30 Navarre Street		Street Address 10 Kerins Terrace			
City West Warwick	State RI	Zip 02893	City Newport	State RI	Zip 02840
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment ☐					
Director Name Bradford L. Barco		Director Name Raymond W. Cahoon, Jr.			
Street Address 761 Nooseneck Hill Road		Street Address 50 Hendricksen Court			
City West Greenwich	State RI	Zip 02817	City Warwick	State RI	Zip 02889
Director Name Daniel E. Lee		Director Name John C. Beebe, III			
Street Address 30 Navarre Street		Street Address 10 Kerins Terrace			
City West Warwick	State RI	Zip 02893	City Newport	State RI	Zip 02840
9. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641.					
Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.					
<i>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee</i>					
Name of Officer/Authorized Representative Bradford L. Barco, President				Date 5/21/2020	
Signature of Officer/Authorized Representative 				SIGN DOCUMENT HERE PRESIDENT	

MAIL TO:
Division of Business Services
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Website: www.sos.ri.gov