State of Rhode Island
Department of State - Business Services Division

FILED
FEB 22 2024
BY

Annual Report for the year: 2024
Non-Profit Corporation
→ Filing period February 1 - May 1
→ Filing Fee: $20.00
→ Penalty: Additional $25.00 fee if form is not filed by May 31.

1. Entity ID Number	2. Exact name of the Corporation
0000 28385	RHODE ISLAND MASONIC YOUTH FOUNDATION, INC.
3. State of Incorporation: RI	5. Brief description of the character of business conducted in Rhode Island: CHARITABLE WORK WITH YOUTH
4. NAICS Code: 813110	

6. Principal Office Address	City	State	Zip
2115 BROAD STREET	CRANSTON	RI	02905

7. List ALL officers (names and addresses) — Check the box to indicate an attachment ☐

President Name	Street Address	City	State	Zip
MICHAEL K. LAWSON	70 GRASSMERE STREET	WARWICK	RI	02889

Vice-President Name	Street Address	City	State	Zip
DONALD L. WILLIAMSON	160 EVERLETH AVENUE	WARWICK	RI	02888

Secretary Name	Street Address	City	State	Zip
MICHAEL D. PICARD	3 MEADOWBROOK ROAD	LINCOLN	RI	02865

Treasurer Name	Street Address	City	State	Zip
JAMES R. RAPSON	244 PARK VIEW AVENUE	WARWICK	RI	02888

8. List ALL directors (names and addresses). RI Corporations **MUST** list at least **THREE** directors.
Check the box to indicate an attachment ☐

Director Name	Street Address	City	State	Zip
ROBERT I. BURGESS III	40 WEST GREELEY CIRCLE	WARWICK	RI	02886
GILBERT J. FONTES	176 GAINESVILLE DRIVE	WARWICK	RI	02886
JOHN N. TALLMAN	15 ADAMS DRIVE	COVENTRY	RI	02816

9. The Registered Agent information of record with the RI Department of State is accurate. 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.

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

Name of Officer/Authorized Representative: JAMES R. RAPSON, TREASURER
Date: 2/22/24

Signature of Officer/Authorized Representative: James R. Rapson

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615