

State of Rhode Island

Department of State - Business Services Division

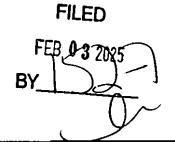
Annual Report for the year:

2025

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



Signature of Officer/Authorized Rep					
Cassandra E. Crandall				February 1, 2025	
Name of Officer/Authorized Representative				Date	
This report must be signed by either the Pres				ntative, Receiver or Trus	too.
Under penalty of perjury, I decla statements, and that all stateme				mpanying schedu	les and
9. The Registered Agent informatio	I n of record with th	I e Ri Department d	I If State is accurate. Changes requ	ire filing Form 641	
City Charlestown	State RI	^{Zip} 02813	City	State	Zip
Street Address 510 Klondike Rd			Street Address		
Director Name Roger Stedman			Director Name		
City Wakefield	State RI	^{Zip} 02879	^{City} Wakefield	State RI	Z _{IP} U2879
Street Address 2378 Post Rd			Street Address 2378 Post Rd		
Director Name Rodney Gilber	t	Director Name Barbara Gilbert			
8. List ALL directors (names and ad	dresses). RI Corp	porations MUST lis		the box to indicate a	n attachment
Charlestown	State RI	^{Zip} 02813	^{City} Charlestown	State RI	<u>ชี</u> 2813
Street Address 201 Klondike Rd			Street Address 201 Klondike Rd		
Secretary Name Cassandra (Crandall	Treasurer Name David Crandall			
Dity Pawcatuck	State CT	^{Zip} 06379	City North Kingstown	State RI	Z _{IP} U∠85∠
Street Address 879 Stonington Rd.			Street Address 220 Earle Drive		
President Name Harold Stedr	nan, Srl	Vice-President Name Kristen Flynn			
7. List ALL officers (names and add	fresses)		Check	the box to indicate an	attachment
6. Principal Office Address c/o Cassandra Crandall, 201 Klondike Rd			City Charlestown	State RI	Zip 02813
4. NAICS Code 813410					
3. State of Incorporation Rhode Island	Brief description of the character of business conducted in Rhode Fraternal non-profit organization			Island	
000029671	2. Exact name of the Corporation Perryville Grange, Incorporated				
1. Entity ID Number	2 Evact name of	the Corporation			

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.n.gov