



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.

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R.I. DEPT. OF STATE
BUS SVCS DIV

1. Entity ID Number <u>000028059</u>		2. Exact name of the Corporation <u>Loggia Roma #271 Order of</u> <u>THE SONS OF ITALY IN AMERICA</u>	
3. State of Incorporation <u>Rhode Island</u>		5. Brief description of the character of business conducted in Rhode Island <u>OUR MISSION</u> <u>is to recognize and HELP worthy individuals</u> <u>and health organizations, who contribute to</u> <u>the Italian language and its principles.</u> <u>we give scholarships and donations.</u>	
4. NAICS Code <u>813319</u>			
6. Principal Office Address <u>7 POMMENVILLE STREET</u>		City <u>PAWTUCKET</u>	State <u>RI</u>
		Zip <u>02861</u>	
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐			
President Name <u>MURIEL G. HEROUX</u>		Vice-President Name <u>DIANNE ARRUDA</u>	
Street Address <u>7 POMMENVILLE STREET</u>		Street Address <u>22 Patriots Way</u>	
City <u>PAWTUCKET</u>	State <u>RI</u>	City <u>SEEKONK</u>	State <u>MA</u>
Zip <u>02861</u>		Zip <u>02771</u>	
Secretary Name <u>Barbara Bourgeny</u>		Treasurer Name <u>Lorraine Elderkin</u>	
Street Address <u>11 Eisenhower Drive</u>		Street Address <u>65 Basset Street</u>	
City <u>Smithfield</u>	State <u>RI</u>	City <u>PAWTUCKET</u>	State <u>RI</u>
Zip <u>02917</u>		Zip <u>02861</u>	
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment ☐			
Director Name <u>LISA A. HEROUX</u>		Director Name <u>Nancy Mc Allister</u>	
Street Address <u>7 Pommenville Street</u>		Street Address <u>23 Terrace Ave</u>	
City <u>PAWTUCKET</u>	State <u>RI</u>	City <u>PROVIDENCE</u>	State <u>RI</u>
Zip <u>02861</u>		Zip <u>02909</u>	
Director Name <u>Marian Linda</u>		Director Name <u>Daniel Bandiers</u>	
Street Address <u>359 GREENWICH AVE, APT 109</u>		Street Address <u>85 Kennedy Circle</u>	
City <u>WARWICK</u>	State <u>RI</u>	City <u>HYANNIS</u>	State <u>MA</u>
Zip <u>02886</u>		Zip <u>02601</u>	
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 <u>Muriel G. Heroux</u>			Date <u>6-3-25</u>
Signature of Officer/Authorized Representative <u>Muriel G. Heroux</u>			

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

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