

A. Ralph Mollis, Secretary of State Corporations Division

148 W. River Street

## NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2008

Providence, RI 02904-2615 401.222.3040

Filing Period: June 1 - June 30 • Filing Fee: \$20.00\* • THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.

In accordance with R.I.G.L.. 7-6-94, each corporation failing or refusing to file its annual report within the time prescribed by law (R.I.G.L. 7-6-91) is subject to a penalty fee of \$25.00.

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1. Corporate ID No. 31474	2. Name of Corporation SAN BERNARDO SOCIAL CLUB OF RHODE ISAND							
3. State of Incorporation		ode Island - Street Address		PROVIDENCE	Zip			
5. Foreign corporation. Enter principal office address			City	State	Zip			
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island PROMOTE FRATERNALISM AND COMRADERY AMONG ITS MEMBERS								
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHA President Name ROBERT SANTURK!			Vice President Name	GIORPANO				
Street Address 60 A STREET			400 SCITUATE AVE. TIE					
CRANSTON	State RI	02920	CRANSTON	State RI	TO TO SEE			
Louis PicciRILLi			ERWEST J. MASI JE					
Street Address 9 COLDNY DRIVE			Street Address 51 WEST RIVER PARKWAY					
CHY JUHU STON	State	02919	NORTH PROV	State RI	10750°			
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23								
Director Name	DESIMO		DIAMOND TAGILIATELA					
Street Address 99 SU	mmit D	RIVE	77 CATHEDRAL AVE.					
CRANSTON	State . I.	05 PS CO <sup>WX</sup>	PROVIDENCE	State	80950			
Director Name PETER DESIMONE			JUHN RICOTTILLY					
Street Addiress 62 BROOKSIELD DRIVE			Street Address 1800 DOUGLAS AVE					
CRANSTON		<sup>Zip</sup> 02970	NORTH PROV	State RI	24,02504			
9. REGISTERED AGENT IN RHODE ISLAND VINCENT TRABUCCO								
This information is currently of record in the Office of the Secretary of State. Changes require filing of Form 641 - R.I.G.L. 7-6-13/7-6-78								
This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee								

## **FILED**

	DEC 23 2008  By 07661	<u>-</u>	Under penalty of perjury, I decla pepert, including any accompanyi	ng schedules and statement	
File Date	01:	SOUR DEC S3 PMI	statements contained berein are to  Next  Signature of Office  ERNEST  J	me and coffee.  MAS ( JR	12-13-08 Date
By:FOI	R SECRETARY OF STATE USE ONLY, 314	034/1738 18 17 47/2 12/146 18 17 47/2 12/146	Print or Type Name of Officer TREASURER Title of Officer	Form 6	31 Rev. 09/17