

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street

Providence, RI 02904-2615 401.222.3040

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2009

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.

| permiss fie of \$25.00. | | | | | | |
|--------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|-------------------------------|--------------------------|--|
| 1. Corporate 1D No. | 2. Name of Corp. | 2. Name of Corporation | | | | |
| 486836 | | Homeowners Associati | | City | | |
| 3. State of Incorporation | 4. Corporate ado | 4. Corporate address in Rhode Island - Street Address | | | ZΨ | |
| Rhode Island | 1150 New | London Avenue | | Cranston | 02920 | |
| 5. Foreign corporation. Enter principal office address | | | City | State | Zψ | |
| 6. Brief Description of the char | | | | | <u> </u> | |
| To manage, control, op | perate, maintain, re | epair and improve certain | in real estate in Cranston, R | hode Island | | |
| 7. NAMES AND ADDRE | SSES OF THE OF | FICERS: ("X" BOX FOR A | <i>TTACHMENT)</i> | ACES BEFORE USING ATT | ACHMENTS | |
| President Name | | | Vice President Name | | | |
| Frank Paolino | | | Diane L. Torkomian | | | |
| Street Address | | | Street Address | | | |
| 1150 New London Av | venue | | 1150 New Londor | n Avenue | | |
| City | State | Ζip | City | State | Zψ | |
| Cranston | RI | 02920 | Cranston | RI | 02920 | |
| Secretary Name | | | Treasurer Name | | | |
| Lori Marchetti | | | Diane L. Torkomian | | | |
| Stroet Address | | | Street Address | | | |
| 1150 New London A | venue | | 1150 New London | Avenue | | |
| Clty: | State | Zip | City | State | Ζip | |
| Cranston | RI | 02920 | Cranston | RI | 02920 | |
| | | | ATTACHMENT) FILL IN SI | | | |
| THE NUMBER OF DIR | ECTORS OF A DO | MESTIC (RHODE ISLA | ND) CORPORATION SHAL | <u>L NOT BE LESS THAN TH</u> | REE (3). R.I.G.L. 7-6-23 | |
| Director Name | | | Director Name | | | |
| Frank Paolino | | | Diane L. Torkomian | | | |
| Street Address | | | Sireet Address | | | |
| 1150 New London A | venue | | 1150 New London Avenue | | | |
| Clip | State | Zi p | City | State | Zip | |
| Cranston | RI | 02920 | Cranston | RI | 02920 | |
| Director Name | | | Director Name | | | |
| Lori Marchetti | | | | | | |
| Street Address | | | Street Address | | | |
| 1150 New London A | venue | | 1 | | | |
| City | State | Zip | Cily | Staie | Zip | |
| Cranton | RI | 02920 | a de la companya de | | | |
| 9. REGISTERED AGEN | The second secon | | | | | |
| This information is | antin of moord := +1 | o Office of the Secretory | of State Changes require filing | e of Form 641 - RICI 7-6 | i-13/7-6-78 | |
| | | | of State. Changes require filing | | | |
| This report | must be signed by | either the President, Vi | ce President, Secretary, Assis | stant Secretary, Treasurer, F | Receiver or Trustee | |
| | | | | | | |

| | Under penalty of perjury, I declare and affirm that I have examined th report, including any accompanying schedules and statements, and that a |
|-----------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------|
| File Date FILED | statements contained herein are true and correct. |
| Check No. NOV 1 8 2009 | Signature of Officer Date |
| ~ 0.0 | Frank Paolino Print or Type Name of Officer |
| FOR SECRETARY OF STATE USE ONLY | President |
| PAR SIX.RSTART OF STATE COS. CAUS | Title of Officer |