State of Rhode Island
and Providence Plantations
Office of the Secretary of State

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 2007

***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.***

1. Corporate ID No.	2. Name of Corporation		
30467	WOOD ESTATES RESIDENTS ASSOCIATION		
3. State of Incorporation	4. Corporate address in Rhode Island - Street Address	City	Zip
RHODE ISLAND	P.O. BOX 643	COVENTRY	02816
5. **Foreign corporation.** Enter principal office address	City	State	Zip
		RI	

6. Brief Description of the character of the affairs which are actually conducted in Rhode Island

NEIGHBORHOOD ASSOCIATION

7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ **FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name	Street Address	City	State	Zip
HARRY LARSON	3 PEACHTREE LANE	COVENTRY	RI	02816

~~Vice~~ President Name	Street Address	City	State	Zip
ALAN HOLLENBECK	9 JACK PINE ROAD	COVENTRY	RI	02816

Secretary Name	Street Address	City	State	Zip
SUE MORRISSETTE	18 MAGNOLIA LANE	COVENTRY	RI	02816

Treasurer Name	Street Address	City	State	Zip
KATHY WEST	114 WOOD COVE DRIVE	COVENTRY	RI	02816

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	Street Address	City	State	Zip
ALAN HOLLENBECK	9 JACK PINE ROAD	COVENTRY	RI	02816

Director Name	Street Address	City	State	Zip
HARRY LARSON	3 PEACHTREE LANE	COVENTRY	RI	02816

Director Name	Street Address	City	State	Zip
DAVE TALBERT	22 LYNN DRIVE	COVENTRY	RI	02816

Director Name	Street Address	City	State	Zip
DORY TALBERT	22 LYNN DRIVE	COVENTRY	RI	02816

9. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 641 - R.I.G.L. 7-6-13 7-6-78

Agent Name	Address	City	Zip
HARRY LARSON	3 PEACHTREE LANE	COVENTRY	02816

SEP 2007

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

FILED
OCT 16 2007
By 039567
10:20

File Date	
Check No.	
By:	

FOR SECRETARY OF STATE USE ONLY

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.

Kathleen M. West — 8/20/07
Signature of Officer — *Date*

KATHLEEN M. WEST
Print or Type Name of Officer

TREASURER
Title of Officer

Form 631 Rev. 12/06