

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 2008

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 substituted in the substitute of \$25.00.

to a penatty fee of \$25.00	<u> </u>	_		with the time presc.	wea oy taw (	R.I.G.L. 7-6-91) is subje	
1. Corporate ID No.		2. Name of Corporation					
144239	Crow's Ne	Crow's Nest Condominium Association					
3. State of Incorporation	4. Corporate a	ddress in Rhode Island - Stree	l Address	City	<del></del>	7	
Rhode Island	c/o 443 Ho	ope Street		Bristo	J	Zip	
5. Foreign corporation. Enter principal office address			City	State		RI	
				state		ZΨ	
6. Brief Description of the char	acter of the affairs whi	ich are actually conducted in	Rhode Island				
Condominium Associat	ion for Crow's Ne	st Condominiums 155-	159 Franklin Street, Bristo	ol, RI 02809			
7. NAMES AND ADDRE	SSES OF THE OF	FICERS: ("X" ROX POR	N <i>ttachment</i> ) 🗌 Piel in		and the state of the same of t		
President Name			Vice President Name	SPACES BEFORE U	SING ATTAC	HMENTS	
Ronald J. Rodrigues	Ronald J. Rodrigues			Joyce C. Rodrigues			
Street Address				Street Address			
209 Hope Street			209 Hope Street				
Сиу	State	Zíp	City	State		T	
Bristol	Ri	02809	Bristol			Zip	
Secretary Name	<del></del>	102000	Treasurer Name	RI		02809	
	Joyce C. Rodrigues			Ronald J. Rodrigues			
Street Address			Street Address				
209 Hope Street			209 Hope Street				
City	State	Zip	City	State		Zin	
Bristol	. IRI	02809	Bristol	l 5.		Zip	
8. NAMES AND ADDRES	SES OF THE DIR	ECTORS: ("X" BOX FOR	ATTACHMENT) TRULE IN	SDACES BEFORE	INC ATTACK	02809	
THE NUMBER OF DIRE	CTORS OF A DO.	MESTIC (RHODE ISLA	ND) CORPORATION SHA	ALL MOT BE A FOR W	ANG ATTACI	HMENTS	
Director Name		· · · · · · · · · · · · · · · · · · ·	Director Name	LL NOT BE LESS T	HAN THREE	(3). R.I.G.L. 7-6-23	
Ronald J. Rodrigues			1				
Street Address			Joyce C. Rodriguess				
209 Hope Street			Street Address				
City	State	15	209 Hope Street	<u>t</u>			
Bristol	RI	Zip	Cuy	State		Zip	
Director Name	וחו	02809	Bristol	RI		02809	
Alfred R. Rego, Jr.			Director Name			<del></del>	
Street Address	<del></del>	<del></del>			_		
65 Franklin Street			Street Address				
City	Cr. ut-						
Bristol	State	Zip	Clly	State		Zip	
	R	02809					
geni Name	N KHODE ISLAN	D - DO NOT ALTER - C	hanges require filing of	Form 641 - R.I.G.I	7-6-13 / 7-	6-78	
Alfred R. Rego, Jr., Esc			Address				
	- <del> </del>						
Address		· · · · · · · · · · · · · · · · · · ·	City	· · · · · · · · · · · · · · · · · · ·	Zip		
43 Hope Street			Bristol, RI		02809		
This report must be signed by either the President, Vice							
inis report mu	st be signed by eit	ther the President, Vice	President, Secretary, Assis	tant Secretary, Treas	urer. Receive	er or Trustee	
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	<b>                                    </b>						
1 4	4 2 3 9		Under nenalty	of perjury, I declare a	and office the		
		<del></del>	report, includi	ing any accompanying	mu annın mar	I I have examined this	
FII	.ED	Haraman and the second of the	statements cor	ntained hereld are true	and correct.	statements, and that an	
File Date		1	1/_	.01/11 0	.5		
DIAN A	0 0000	3. A. W. C.	Signature of Of	Les Just	$\frac{\nu_{f}}{2}$		
Check No. JUN U	3 2008	<u> </u>	Signature of Of	1 / /		Date	
D ~ 5	211	estate and the second of the s	Ronald J. Rodrigues  Print or Type Name of Officer  President				
<sub>ву.</sub> Ву 🔀	<i>&gt;∪</i> 6						
FOR SECRETARY OF	STATE HOT OWN						
. OR SECRETARI OF	MALE DOE UNLY	<u></u>	Title of Officer			<del></del>	
		<del></del>	Time of Officer			_	