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 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 subject to a penalty fee of $25.00.***

1. Corporate ID No.	2. Name of Corporation		
123133	Two Thomas Street Owner's Association, Inc		
3. State of Incorporation	4. Corporate address in Rhode Island - Street Address	City	Zip
Rhode Island	Two Thomas Street, Unit 200	Providence	02903
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

Conducting the business of an owner's association of Two Thomas Condo.

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

President Name	Vice President Name
Daniel Baudouin	Peter Steinsaber
Street Address	Street Address
Two Thomas St. Unit 200	Two Thomas St.
City / State / Zip	City / State / Zip
Providence / R.I. / 02903	Providence / R.I. / 02903
Secretary Name	**Treasurer Name**
Street Address	Street Address
City / State / Zip	City / State / Zip

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	Director Name
Robert Allio	H. Lebaron Preston
Street Address	Street Address
Two Thomas St. Unit 700	1570 West St.
City / State / Zip	City / State / Zip
Prov. / R.I. / 02903	Prov. / R.I. / 02909
Director Name	Director Name
Robert Augre, Jr.	
Street Address	Street Address
1570 Westminster St.	
City / State / Zip	City / State / Zip
Providence / R.I. / 02909	

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
Daniel A. Baudouin	
Address	City / Zip
Two Thomas St. Unit 200	Prov. / 02903

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

[redacted] [redacted]

File Date	FILED
Check No.	JUN 03 2008
By:	ty 834

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.

Signature of Officer — Date: 5/26/08

Daniel A. Baudouin
Print or Type Name of Officer

President
Title of Officer

[redacted]

Form 631 Rev. 12/06