

FOR SECRETARY OF STATE USE ONLY

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

Providence, RI 02904-2615 401.222.3040

Form 631 Rev. 12/06

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 PLC 1.76.04 and accordance wit

to a penalty fee of \$25.00.	7-0-94, each corporation failing or refusing to	file its annual report within the i	time prescribed by law	(R.I.G.L. 7-6-91) is subject
1. Corporate ID No. 26115	2. Name of Corporation HOLSON ROAD Neighborhood Association Inc.			
3. State of Incorporation Rhi)de Island	1. Corporate address in Rhode Island - Street Midres NON C		city	nune
5. Foreign corporation, Enter prin	cipal office address	City 0.700.4 c	state NONC	zip none
110110		10Ne	HORC	,,,,,,
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island Promoting the Welfare of the Hauson Rd. Association				
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) [ FILL IN SPACES BEFORE USING ATTACHMENTS				
President Name Leter Dennehu		Vice President Name		
Street Address 36 4111501	RX.	Street Address ; /	Rd.	
Barrington	R.T., 22p 02806	Barrington	State	2ip 02806
Secretary Numer Sandra Kavi	1eV	Treasurer Named Blaine		
Street Address 29 FIAIS	on Rd	Street Address // 20 HAUSON	Rd	
Darrington 8. Names and addresses	State 240 SO 6  OF THE DIRECTORS: ("X" BOX FOR ATTA	Barrington	聚士.	02806
THE NUMBER OF DIRECTO	ORS OF A DOMESTIC (RHODE ISLAND)			CHMENTS
Director Ngme	AS OF A DOMESTIC (KITODE ISLAND)	Director stame	<u>BE LESS THAN THE</u>	EE (3). R.I.G.L. 7-6-23
June Spe	Pakman	-James Karney		
Street Address	Rd.	Street Address 29 Hanson	Rd	
Barrington.	State	Barrington	State P. I.	<sup>21</sup> 70,2806
Director Name Prescot	Cronin	Director Name V NONE		
street Address 60 Martin	Ave.	Street Address		
Barrington 9. REGISTERED AGENT IN R	RII. 01806	Cay NONE	State NONE	zip nome
7. M. D. H. M.				
Sandra K	avney	Address 10/16		
Address 39 Hunson	Rd	Barrington F	RI U2	806
This report must b	oe signed by either the President, Vice Pres	ident, Secretary, Assistant Secr	etary, Treasurer, Rece	eiver or Trustee
		•		
		Under penalty of perjur	y, I declare and affirm	that I have examined this
r-11 t	<b>: :</b> • • • • • • • • • • • • • • • • • • •	report, including any acc statements contained her		nd statements, and that all
File Date	:D	Andre 9	( In all	6/1/0
	2000	Signature of Officer	per july	Bate
Check No. JUN 03	CUUT	Sawlra	Kavned	
By 5	44	Print or Type Name of Off	ficer	