



STATE OF RHODE ISLAND  
AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State

Matthew A. Brown, Secretary of State  
Corporations Division  
100 North Main Street, Providence, RI 02903-1335  
401.222.3040

**NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2008**

Filing Period: June 1 - June 30 • Filing Fee: \$20.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 57796		2. Name of Corporation Rose Garden Condominium Association	
3. State of Incorporation Rhode Island	4. Corporate address in Rhode Island - Street Address 181 Knight St		City Warwick
5. Foreign corporation: Enter principal office address		City	Zip 02886
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island Condominium Management		State RI	Zip 02886

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

President Name Carol Grover			Vice President Name Megan Rezendes		
Street Address 404 Post Road #3			Street Address 404 Post Road #4		
City Warwick	State RI	Zip 02888	City Warwick	State RI	Zip 02888
Secretary Name Elaine Boyd			Treasurer Name Kerri Potter		
Street Address 404 Post Road #2			Street Address 404 Post Road #6		
City Warwick	State RI	Zip 02888	City Warwick	State RI	Zip 02888

**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 Carol Grover			Director Name Megan Rezendes		
Street Address 404 Post Road #3			Street Address 404 Post Road #4		
City Warwick	State RI	Zip 02888	City Warwick	State RI	Zip 02888
Director Name Elaine Boyd			Director Name Kerri Potter		
Street Address 404 Post Road #2			Street Address 404 Post Road #6		
City Warwick	State RI	Zip 02888	City Warwick	State RI	Zip 02888

**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 RIPAC		Address	
Address 181 Knight St		City Warwick	Zip 02886

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



**FILED**

File Date: JUN 20 2008

Check No. 39123

By: [Signature]

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.

*Carol Grover* 6/11/08

Signature of Officer: Carol Grover

Print or Type Name of Officer: President

Title of Officer: President