

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

401.222.3

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 benalty fee of \$25.00

1 A									
1. Corporate ID No. 155095	, ,	2. Name of Corporation							
		Condominium Associa							
3. State of Incorporation	E	dress in Rhode Island - Street	Gity	Ζψ					
Rhode Island	26 Vernon			Providence	02903				
5. Foreign corporation. Enter principal office address			City	State	Ζip				
6. Brief Description of the char	acter of the affairs whic	b are actually conducted in F	Phode Island						
Operate a Condominiu	m Association								
7. NAMES AND ADDRE	SSES OF THE OF	FICERS: ("X" BOX FOR A	TTACHMENT) [] FILL IN SPA	CES BEFORE USING ATTA	CHMENTS				
President Name			Vice President Name						
Lili Liong	Lili Liong								
Street Address			Street Address						
83 Walmer									
City:	State	Zip	Gity	State	Ζψ				
East Providence	RI	02914			- 				
	ecretary Name			Treasurer Name					
Ndidi St. Franc			Sylvia Bernal						
Street Address			Street Address						
24 Vernon St			26 Vernon						
City.	State	Zip	City	State	Zip				
Providence	RI	02903	Providence	RI	02903				
1. NAMES AND ADDRE	sses of the dir	ECTORS: ("X" BOX FOR	ATTACHMENT) FILL IN SPA	CES BEFORE USING ATTA	CHMENTS				
THE NUMBER OF DIRI	CTORS OF A DO	WESTIC (RHODE ISLA	ND) CORPORATION SHALL	NOT BE LESS THAN THR	<u>EE</u> (3). R.I.G.L. 7-6				
Director Name			Director Name						
			1	Sylvia Bernal					
	20-0		Sylvia Bernal						
treet Address					William Company				
Street Address 83 Walmer			Sylvia Bernal Street Address		**************************************				
treet Address 33 Walmer Juy	State	Ζψ	Sylvia Bernal	State	Zib				
itreet Address 33 Walmer itty	State RI	Ζψ 02914	Sylvia Bernal Street Address 26 Vernon City	i i	Zip 02903				
treet Address 33 Walmer Sity East Providence Director Name		i "	Sylvia Bernal Street Address 26 Vernon	State RI	Zip 02903				
Street Address 33 Walmer City East Providence Director Name		i "	Sylvia Bernal Street Address 26 Vernon City Providence	i i	1 *				
Street Address B3 Walmer City East Providence Director Name Ndidi St Franc		i "	Sylvia Bernal Street Address 26 Vernon City Providence	i i	1 *				
Street Address B3 Walmer City East Providence Director Name Ndidi St Franc Street Address		i "	Sylvia Bernal Street Address 26 Vernon City Providence Director Name	i i	1 *				
treet Address B3 Walmer Bity East Providence Director Name Ndidi St Franc treet Address B4 Vernon St		i "	Sylvia Bernal Street Address 26 Vernon City Providence Director Name	i i	02903				
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Street Address B3 Walmer City East Providence Director Name Ndidi St Franc Street Address 24 Vernon St City Providence	RI State RI	02914 Zip 02903	Sylvia Bernal Street Address 26 Vernon City Providence Director Name Street Address	RI	02903				
Street Address 33 Walmer City East Providence Director Name Ndidi St Franc Street Address 24 Vernon St City Providence 1. REGISTERED AGENT gent Name	RI State RI	02914 Zip 02903	Sylvia Bernal Street Address 26 Vernon City Providence Director Name Street Address	RI	02903				
Street Address B3 Walmer City East Providence Director Name Ndidi St Franc Street Address 24 Vernon St City Providence 1. REGISTERED AGENT Street Name	RI State RI	02914 Zip 02903	Sylvia Bernal Street Address 26 Vernon City Providence Director Name Street Address City Changes require filling of Fe	RI	02903				
Lili Liong Street Address 83 Walmer City East Providence Offrector Name Ndidi St Franc Street Address 24 Vernon St City Providence D. REGISTERED AGENT Igent Name Sylvia Bernal	RI State RI	02914 Zip 02903	Sylvia Bernal Street Address 26 Vernon City Providence Director Name Street Address City Changes require filing of Foundaries	RI	02903				

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Under penalty of perjury, I declare and affi report, including any accompanying schedul statements contained herein are true and con	es and statements, and that all
superval	6/21/08
Signature of Officer	Date
Sylvia Bernal	
Print or Type Name of Officer	
Treasurer	
Title of Officer	

Form 631 Rev. 12/06