



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 2009

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. 75409		2. Name of Corporation FERNWOOD II HOMEOWNERS' ASSOCIATION, INC.			
3. State of Incorporation Rhode Island		4. Corporate address in Rhode Island - Street Address 90 Fernwood Lane		City Saunderstown	Zip 02874
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 Ownership and management of common land for residential subdivision					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name John O. Fonce			Vice President Name		
Street Address 90 Fernwood Lane			Street Address		
City Saunderstown	State RI	Zip 02874	City	State	Zip
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 Karen Estes			Director Name Suzanne Barry		
Street Address 67 Fernwood Lane			Street Address 68 Fernwood Lane		
City Saunderstown	State RI	Zip 02874	City Saunderstown	State RI	Zip 02874
Director Name Richard Fallon			Director Name		
Street Address 69 Fernwood Lane			Street Address		
City Saunderstown	State RI	Zip 02874	City	State	Zip
9. REGISTERED AGENT IN RHODE ISLAND					
This information is currently of record in the Office of the Secretary of State. Changes require filing of Form 641 - R.I.G.L. 7-6-13/7-6-78					

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

75409

FILED	
File Date	JUN 03 2009
Check No.	
By:	By 1090
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 **John O. Fonce** Date **5/24/2009**
Print or Type Name of Officer
President
Title of Officer