

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.

| penalty fee of \$25.00. | - ··· | | | | |
|--|--|---|--|-------------|----------------------|
| 1. Corporate ID No. 39/22 | 2. Name of Corporation PASCOAG LAKE SHORES IMPROVEMENT ASSN. | | | | |
| 3. State of Incorporation RI | | bode Island - Street Address KEDRIVE | POBOX 239 | CHEPACHET | ^{Zip} 028/4 |
| 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 Islan | | | nd | | |
| IMPROVEMENT OF HEALTH, SAFETY AND RECREATION OF THE ORG. | | | | | |
| 7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) [FILL IN SPACES BEFORE USING ATTACHMENTS | | | | | |
| President Name | | | Vice President Name | | |
| BEVER/Y GOULET | | | ROBIN COTE | | |
| Street Address POBOX239/362 LAKE DRIVE | | | PO BOX 326 / 55 KEARNS ROAD | | |
| Cuy | State | Zip | City | State | Zip |
| CHEPACHET | アエ | 02819 | CHEPACHET | RI | 02814 |
| Secretary Name | | | Treasurer Name | | |
| DEBORAH NADEAU | | | JANET L. CARDARELLI | | |
| Street Address POBOY 903 - 32 FIRST RUAD | | | Street Address POBOX 765 / 53 SECOND ST. | | |
| City | State | Zip | City | State | Zip |
| CHEPACHET | $Z\Sigma$ | 028/4 | CHEPACHET | <i>RI</i> | 028/4 |
| 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 | | |
| BEVERLY GOULET | | | ROBIN COTE | | |
| Street Address | | | Street Address | | _ |
| POBOX 239-3 | 62 LAKE L | PIVE | POBOX 326 - | 55 KEARNS | ROAD |
| CHEPACHET | State T(] | 02814 | CHEPACHIET | State アエ | 028/4 |
| Director Name | | | Director Name | | |
| DEBORAH NADEAU | | | JANET L. | CARDHREL | <i>L.</i> I |
| Street Address | | | Street Address | | |
| POBOX 903 | 32 FIRST | ROAD | POBOX 765/ | 53 SECOND | ROAD |
| POBOX 903 — . City CHEPACHET 9. REGISTERED AGENT IN I | State RT RHODE ISLAND | 02814 | CHEPACH ET | State RT | 02814 |
| 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 | | | | | |

| File Date |
|---------------------------------|
| Check Noj UN 0 9 2009 |
| By/53 |
| 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.

JANET L. CARDARELLI

TREASURER

Title of Officer