

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street Providence, RI 02904-2615

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

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

401.222.3040

to a penalty fee of \$25.00.						
1. Corporate ID No. 26192	2. Name of Corporation	MANNEHIEL	E IMPROVER	FINT ASSO	10/AJON	
3. State of Incorporation	A Company address in P	bode Island - Street Address	2			
RHODE TSLANI		IAN BUN	TRAIL	SMITHE ELIS	02917	
5. Foreign corporation. Enter prin	4		City	State	Zip	
,	. ~		1			
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island A 21012 BRGANIZATION WHICH						
MAINTAINS THE WELL BEING OF THE LAKE + SURROUNDING						
7. NAMES AND ADDRESSES OF THE OFFICERS: "X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS						
President Name			Vice President Name			
Lois CAPHNOEN			,			
Street Address			Street Address			
115 ENDIAN PUNITRAIL						
Glty +	State	216	City:	State	Zip	
SMITH FIELD	State R.I.	02917	<u></u>			
Secretary Name			Treasurer Name	•		
			GARY CAPLINGEN			
Street Address			Street Address 115 INDIAN RUN TRAIL			
City	State	Zφ	SMITH FIELD	State R.I.	02917	
			SMITHTILLIS	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	027/	
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. 7-6-2						
Director Name			Director Name			
CONSTANCE	Youct		GERALD M	ENARD		
Street Address	_		Street Address -	\	<u>ン</u>	
TOTEM POLE TRAIL			43 DEER RUN JRAIL			
City	State	Zip	City	State	Zip ST	
SMITHFIELD	$ \mathcal{R}J $	02917	SMIFTELD	K.L.	027//	
Director Name			Director Name			
LAURA DE LUCA						
Street Address			Street Address			
INDIAN ROW TRAIL						
SMITHFIELD	Sian I.	32917	City	State	Zip	
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			Address			
LDIS CAPLINGEN						
Address			City	ZiD		
115 ININA) Dun -	Teni	SMITHFIELD	RT 029	7/	
115 INDIAN RUN TRAIL SMITHFIELD, R.I 02917						

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

	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.
File Date FILED	Signature of Officer Date
Check No. JUN 9 2009	
Check 149: 3014 # 9 2009	2015 CAPLINGER
By: By 1003	Print or Type Name of Officer
FOR SECRETARY OF STATE USE ONLY	TRESIDENT
TON SECTION OF STREET OF STREET	Title of Officer