

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 the prescribed by law (R.I.G.L. 7-6-91) is subject.

penalty fee of \$25.00.		on regularing to ju	ue us annual report within the tu	me prescribed by law (R.I.G.L.	7-6-91) is subject to a
1. Corporate ID No.	2. Name of Corporation				
29228	WARREN	'S POINT ASSO	CIATION INC		
3. State of Incorporation	The Continue adminest	i in khodo idana - Steat A.J.	J	City	Zip
KHODE ISLAND	HIYN + HOPE	INC ONE ANN	+ HOPE WAY	CLMBERLAND	01864-6918
S. Foreign corporation. Enter principal office address			City	State	Zip
6.8.65			Į.		
6. Brief Description of the characte	r of the affairs which ar	e actually conducted in Rhod	le Island		
7. NAMES AND ADDRESSI	ES OF THE OFFICE	PR. ("V" DOV COD ATT	4.511157511110		
President Name		CAS: (A BOA FOR ATT	ACHMENT) TILL IN SPACE	ES BEFORE USING ATTA	CHMENTS
ALDEH READ			Vice President Name		
Street Address			Street Address		
24 GRINNELL	ROAD		Street Address		
City	State	Zip	City	State	Zip
LITTLE COMPTON	RI	02837			Zip
Secretary Name			Treasurer Name		
Secretary Name CAROL GREGORY			SAMUEL N CHASE		
Street Address	100		Street Address		
4 LONG POND	LANE		15 LONG POND) LAME	
LITTLE COMPTON	State C T	Ztp	City	State	Zip
8. NAMES AND ADDRESS	I I \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	02837	LITTLE COMPTON	R.I.	02837
THE NUMBER OF DIRECT	OPCOS A DOMECT	UMS: ("X" BOX FOR AT	TACHMENT) TILL IN SPAC	ES BEFORE USING ATTA	CHMENTS
Director Name	ORS OF A DOMES	TIC (KHODE ISLAND) CORPORATION SHALL N	OT BE LESS THAN THRI	E (3). R.I.G.L. 7-6-23
Director Name BARRY MEADE			Director Name		
Street Address			SUSAN AHEARN		
City C State Zip			Street Address 10 LONG POND LANE		
City	State	70			
City: LITTLE COMPTON Director Name	RI	02837	LITTLE COMPTON	State RI	zф 02837
Director Name	1 / 1 ==	0000/		パユ	0283/
<u>WARREN</u> CLARK			Director Name CATHY TAY LOR		
Street Address					
5 GRINNELL ROAD			& ATLIANTIC DRIVE		
City LITTLE COMPTON 9. REGISTERED ACENT IN	State	zip 02837	LITTLE COMPTON	State	Ζιp
DECEMBER ASSESSED	K.L.	02837	LITTLE COMPTON	RI.	02837
7. AEGISTERED AGENT IN	RHODE ISLAND	ŕ	•	•	1 2003/
This information is currently of	of record in the Offi	ce of the Secretary of St	ate. Changes require filing of l	Form 641 - R.I.G.L. 7-6-13/	7-6-78
This report must	be signed by eithe	r the President. Vice Pr	resident, Secretary, Assistant	Secretory T	
		, , , , , , , , , , , , , , , , , , , ,		Secretary, freasurer, Rece	iver or Trustee

File Date FILED	Under penalty of perjury, I declare and affirm report, including any accompanying schedules statements contained heroin are true and correct the contained heroin and contained heroin are true and affirm report, including any accompanying schedules.
Check No. JUN 1 8 2009 By: By 10 9 9	Signature of Officer Signature of Officer Print or Type Name of Officer
FOR SECRETARY OF STATE USE ONLY	Title of Officer