



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Molis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2611
401.222.3011

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. 000105027		2. Name of Corporation Newbury Village Condominium Association, Inc.	
3. State of Incorporation Rhode Island	4. Corporate address in Rhode Island - Street Address 217 Waterman Street		City Providence Zip 02906
5. Foreign corporation. Enter principal office address		City	State Zip
5. Brief Description of the character of the affairs which are actually conducted in Rhode Island Unit Owners Association			
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name Brian M. Knight		Vice President Name Michelle Izzo	
Street Address 59 Ashburton Drive		Street Address 114 Boylston Drive	
City Cranston	State RI	City Cranston	State RI
Zip 02921		Zip 02921	
Secretary Name Cynthia Ely		Treasurer Name Nancie Paola	
Street Address 117 Boylston Drive		Street Address 244 Cheshire Drive	
City Cranston	State RI	City Cranston	State RI
Zip 02921		Zip 02921	
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 Anthony Mastantuono		Director Name Cynthia Ely	
Street Address 249 Cheshire Drive		Street Address 117 Boylston Drive	
City Cranston	State RI	City Cranston	State RI
Zip 02921		Zip 02921	
Director Name Nancie Paola		Director Name	
Street Address 244 Cheshire Drive		Street Address	
City Cranston	State RI	City	State
Zip 02921		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	
Address		City	Zip

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

JUN 23 2009

File Date _____
Check No. _____
By: _____

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 _____
Print or Type Name of Officer
Brian M Knight
President

06/26/09
Date

RECEIVED
SECRETARY OF STATE
CORPORATIONS DIV
JUN 29 AM 11:03