



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. 149350		2. Name of Corporation The Courtyard at Metacom Condominium Association			
3. State of Incorporation Rhode Island		4. Corporate address in Rhode Island - Street Address 663 Metacom Avenue		City Bristol	Zip 02809
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 Condominium Association					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name James McCarty			Vice President Name N/A		
Street Address 663 Metacom Avenue			Street Address		
City Bristol	State RI	Zip 02809	City	State	Zip
Secretary Name Matthew Brito			Treasurer Name James McCarty		
Street Address 663 Metacom Avenue			Street Address 663 Metacom Avenue		
City Bristol	State RI	Zip 02809	City Bristol	State RI	Zip 02809
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 James McCarty			Director Name Matthew Brito		
Street Address 663 Metacom Avenue			Street Address 663 Metacom Avenue		
City Bristol	State RI	Zip 02809	City Bristol	State RI	Zip 02809
Director Name Sarah Principe			Director Name		
Street Address 663 Metacom Avenue			Street Address		
City Bristol	State RI	Zip 02809	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

149350

File Date	FILED
Check No.	JUL 01 2009
By	406
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.

James K. McCarty **6-30-2009**
Signature of Officer Date
JAMES K. MCCARTY
Print or Type Name of Officer
PRESIDENT & TREASURER
Title of Officer