Corporations Division 148 W. River Street

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2009 Providence, RI 02904-2615 401.222.3040 Filing Period: June 1 - June 30 • Filing Fee: \$20 not • This BEDDOT WILL THE PERIOD ANNUAL REPORT FOR THE YEAR 2009 401.222.3040

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.

politicity		
1. Corporate 1D No. OO0136195 North Gardens at L	indhbrook Condominiums Assoc.	
3. State of Incorporation 4. Corporate address in Roode Island. Street Address Fairway Circle	Home Valley 02832	
5. Foreign corporation. Enter principal office address	City State Zij.	
6. Brief Description of the obseractor of the affairs which are actually conducted in Rhode Island To manage the affairs of the condominium association		
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACH.	MENT) TILL IN SPACES BEFORE USING ATTACHMENTS	
President Name Llene Hac Neil	Vice President Name Stephens Grimler	
33 Farway Circle	31 Fairway Circle	
Hope Valley RI Zip 02832	Hope Valley State RI 2002832	
Vincent Guelielmino	Hichael Theriault	
58 Fairway Circle	23 Fairway Circle	
Hope Vellay Sur RI 02832	Cuy Hope Valley Same RI 2002830	
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) FILL IN SPÄCES BEFORE USING ATTACHMENTS THE NUMBER OF BHRECTORS OF A BOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23		
Colleen Long	Director Name Hichael Theriault	
5A FAIRWAY CIRCLE	Street Address Fairway Circle	
Hope Valley SLAVE CA832	Hope Valley RI 210 2832	
Ilene Mac Neil	Stephen H. Grimky	
33 Fairway Circle	Street Address Fairway Circle	
Hope Velley SLOW RI 2402832	Hope Valley State RI Zip 02832	
9. REGISTERED AGENT IN RHODE ISLAND 17 Hann School Rd Sm. Hhfield RI 02917 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		

FILED	
File Date Check No.	JUL 07 2009
Ву:	By 749
FOR SECRETARY OF STATE USE ONLY	

Under penalty of perjury declare and affirm the	at I have examined this
report, including any accompanying schedules and statements contained herein are true and correct.	statements, and that all
Mannin	6-29-09
Signature of Officer Hichael Theriaul	Date
Print or Type Nume of Officer	
Reasurer.	·
Title of Officer	Form 631 Rev. 09/17