

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street

2009 Providence, RI 02904-2615 401.222,3040

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR $\frac{200}{1000}$

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. 000068368	2. Name of Corporation VICTORIAN COURT CONDOMINIUM ASSOCIATION, INC.					
3. State of Incorporation RHODE ISUAND		oode Island - Street Address FNEWUE		WOONSOCKET	UDENS	
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 PESIDENTIAL CONDOMINIUM COMMUNITY ASSOCIATION 7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENT THE PROPERTY OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENT THE PROPERTY OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) THE PROPERTY OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) THE PROPERTY OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) THE PROPERTY OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) THE PROPERTY OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) THE PROPERTY OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) THE PROPERTY OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) THE PROPERTY OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) THE PROPERTY OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) THE OFFICERS: ("X" BOX FOR ATTACHMENT") THE OFFICERS: ("X"						
President Name, DIPIETRO			Vice President Name CONTINUE CONTINUE CONTIN			
U NATE WHIPPLE HIGHWAY # 404			Le NATE WHIPPLE HIGHWAY # 20799			
CUMBBRLAND	State KI	02814	CUMBERLAND	State PL	Carre	
Secretary Name TINA HOOVER			Treasurer Name ROVENTINE 65			
Street Address UP NATE WHIPLE HIGHWAY # 206			LA NHTE WHIPAE HIGHWAY # 102			
CUMBORUAND 8 NAMES AND ADDRESSES	State RI	ZIP ORCIGA S: C"Y" ROY FOR ATTAC	COMBERVAND HMENTO FILL IN SPACES BY	State PI	DOCIO MENTS	
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						
MARY DIPIETRO			Director Name JGHN SCOTT			
Street Address. LO NATE WHIPPLE HIGHWAY # 404			U NATE WHIPPLE HIGHWAY #407			
CUMBERLAND	State RI	CACIO4	CUMPERLAND	State	DACIA	
TINA HOWBE			DIRECTOR Name BILL POVENTINE			
Special Address WHIPPLE HIGHWAY # 205			Le NATE WHIPPLE HIGHWAY Flux			
WMBBZUAND 9. registered agent in i	State PI RHODE ISLAND	020104	CUMBERLAND	State	DASIOH	
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

	m
File Date	FILED
Check No.	DEC 2 8 2009
Bv:	2v W 104450
FG	OR 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.

statements contained herein are true and correct.	
- May M / O/Ketw	12/15
Signature of Officer	Date

Print or Type Name of Officer

PRESIDENT