



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
401.222.3640

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2010

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. 26189		2. Name of Corporation LAKE WASHINGTON ASSOCIATION	
3. State of Incorporation RI		4. Corporate address in Rhode Island - Street Address P.O. BOX 579	
		City Chepachet	Zip 02814
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			
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name PAUL RICHARD		Vice President Name RONALD CAMPBELL	
Street Address 1 LARRY BIRD DR		Street Address 514 LAKE WASHINGTON DR	
City Chepachet	State RI	City Chepachet	State RI
Zip 02814		Zip 02814	
Secretary Name ELEANOR HEUBERGER		Treasurer Name JACQUELINE GIARD	
Street Address 12 CADDY LANE		Street Address 566 LAKE WASHINGTON DR	
City Chepachet	State RI	City Chepachet	State RI
Zip 02814		Zip 02814	
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 DAVID DEARY		Director Name GARY VAN GUZEN	
Street Address 176 LAKE WASHINGTON DR		Street Address 78 LAKE WASHINGTON DR	
City Chepachet	State RI	City Chepachet	State RI
Zip 02814		Zip 02814	
Director Name DENISE RICHARD		Director Name	
Street Address 1 LARRY BIRD DR		Street Address	
City Chepachet	State RI	City	State
Zip 02814		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

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

Date

Jacqueline Giard
JACQUELINE GIARD

Print or Type Name of Officer

Treasurer
Title of Officer

FILED	
File Date	JUN 2 2010
Check No.	W 787
By:	
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