RI SOS Filing Number: 201067438890 Date: 09/20/2010 4:00 PM

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 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.	2. Name of Corporation		
140808	Greene Farm Homeowner's Association		
3. State of Incorporation	4. Corporate address in Rhode Island - Street Address	City	Zip
RI	1430 Ocean Road	Narragansett	02882
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

To Operate Homeowner's Association; To Own and Maintain Open Spaces

7. NAMES AND ADDRESSES OF THE OFFICERS: *("X" BOX FOR ATTACHMENT)* ☐ **FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name			Vice President Name		
Ronald S. Chofay, Jr.			Tina Chofay		
Street Address			Street Address		
1430 Ocean Road			1430 Ocean Road		
City	State	Zip	City	State	Zip
Narragansett	RI	02882	Narragansett	RI	02882
Secretary Name			Treasurer Name		
			Ronald S. Chofay, Jr.		
Street Address			Street Address		
			Same As Above		
City	State	Zip	City	State	Zip

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			Director Name		
Ronald S. Chofay, Jr.			Tina Chofay		
Street Address			Street Address		
Same As Above			Same As Above		
City	State	Zip	City	State	Zip
Director Name			Director Name		
John Shekarchi					
Street Address			Street Address		
14 Lladnar Drive					
City	State	Zip	City	State	Zip
Lincoln	RI	02865			

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

[redacted] [redacted]

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*

President
Print or Type Name of Officer

Ronald S. Chofay, Jr.
Title of Officer

[redacted]

File Date **FILED**

Check No. SEP 20 2010

By: By 3270 & 3281

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53232-4-528884

Form 631 Rev. 09/17