



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
108 W. River Street
Providence, RI 02911-2015
001-222-3010

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2011

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. Corporation ID No. 28952		2. Name of corporation THE SIXTY SIX ACRE IMPROVEMENT ASSOCIATION			
3. State of Incorporation RI		4. Corporate address in Rhode Island - Street Address 400 POND ST.		City WAKEFIELD	Zip 02879
5. Foreign corporation. Enter principal office address			City	State	Zip
6. Description of the corporation - (If appears to be an unincorporated club or society in Rhode Island)					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name PETER N.S. COMELLA			Vice President Name JEFFREY BERRY		
Street Address 400 POND ST.			Street Address 308 WINCHESTER DR.		
City WAKEFIELD	State RI	Zip 02879	City WAKEFIELD	State RI	Zip 02879
Secretary Name JOAN LAUSIER			Treasurer Name DONATO J. FERRARA		
Street Address 408 POND ST.			Street Address 400 POND ST.		
City WAKEFIELD	State RI	Zip 02879	City WAKEFIELD	State RI	Zip 02879
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> 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 PETER N.S. COMELLA			Director Name JEFFREY BERRY		
Street Address 400 POND ST.			Street Address 308 WINCHESTER DR.		
City WAKEFIELD	State RI	Zip 02879	City WAKEFIELD	State RI	Zip 02879
Director Name JOAN LAUSIER			Director Name DONATO J. FERRARA		
Street Address 408 POND ST.			Street Address 400 POND ST.		
City WAKEFIELD	State RI	Zip 02879	City WAKEFIELD	State RI	Zip 02879
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

FILED

File Date **JUN 01 2011**
 Check No. **RY 112**
 By: _____
 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.

Signature of Officer **Peter N.S. Comella** Date **5-31-11**
 Print or Type Name of Officer **PETER N.S. COMELLA**
 Title of Officer **PRESIDENT**