

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

Fee: \$20.00

Division Of Business Services 148 W. River Street Providence RI 02904-2615 (401) 222-3040

Non-Profit Corporation Annual Report

Filing Period: June 1 - June 30

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.

ANNUAL REPORT YEAR: 2011

1. Corporate ID No. 000084602

- 2. Name of Corporation <u>JOHNSON'S POND CIVIC ASSOCIATION</u>, INC.
- 3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: P.O. BOX 123

City or Town: COVENTRY State: RI Zip: 02816 Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street:

City or Town: State: Zip: Country:

6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island

TO IMPROVE THE FACILITIES OF JOHNSON'S POND AND THE PROPERTY ADJACENT AND ABUTTING THERETO.

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed. If officers and/or directors have been elected, the title
Incorporator is no longer applicable; please delete

THE NUMBER OF DIRECTORS OF A DOMESTIC(RHODE ISLAND)CORPORATION SHALL NOT BE LESS THAN THREE(3). R.I.G.L. 7-6-23

Title	Individual Name	Address	
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country	
PRESIDENT	MARK ASHLEY	PO BOX 123 COVENTRY, RI 02816 USA	
TREASURER	LORI LEMOI	PO BOX 123 COVENTRY, RI 02816 USA	
SECRETARY	MICHELLE LANCIAUX	14 BESTWICK TRAIL COVENTRY, RI 02816 USA	
VICE PRESIDENT	JOHN STUDLEY	PO BOX 123 COVENTRY, RI 02816 USA	
DIRECTOR	MICHELLE LANCIAUX	14 BESTWICK TRAIL COVENTRY, RI 02816 USA	
DIRECTOR	JOHN STUDLEY	PO BOX 123 COVENTRY, RI 02816 USA	
DIRECTOR	LORI LEMOI	PO BOX 123 COVENTRY, RI 02816 USA	

8. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78

ARNOLD L. BLASBALG, ESQ. 98 WOOD COVE DRIVE COVENTRY, RI 02816

9. This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver, or Trustee.

Signed this 5 Day of June, 2011 at 5:36:00 PM. This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-6.

By MARK D. ASLEY

Signature of Officer of the Corporation

x President or	Vice President or	Secretary or	Assistant Secretary or
Treasurer or	Receiver or T	rustee (check on	ne)

This report cannot be accepted for filing if an officer has executed the form and he/she is not listed in Section 7.

Form No. 631 Revised 09/07

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