



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 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. Corporate ID No. 149884		2. Name of Corporation RESERVOIR AVENUE CONDOMINIUM ASSOCIATION, INC.	
3. State of Incorporation RI	4. Corporate address in Rhode Island - Street Address 201 RESERVOIR AVE.		City LINCOLN
		Zip 02865	
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 6 UNIT CONDOMINIUM COMPLEX TO GOVERN MANAGE & MAINTAIN			
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name JOSEPH FEULA		Vice President Name	
Street Address 201 RESERVOIR AVE UNIT #3		Street Address	
City LINCOLN	State RI	City	State
Zip 02865		Zip	
Secretary Name		Treasurer Name JOHN LUSSIER	
Street Address		Street Address 201 RESERVOIR AVE. UNIT #4	
City	State	City LINCOLN	State RI
Zip 02865		Zip 02865	
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 JOSEPH FEULA		Director Name JOHN LUSSIER	
Street Address 201 RESERVOIR AVE UNIT 3		Street Address 201 RESERVOIR AVE UNIT #4	
City LINCOLN	State RI	City LINCOLN	State RI
Zip 02865		Zip 02865	
Director Name ED SHURTLEFF		Director Name	
Street Address 92 MOSWANICAT ST.		Street Address	
City SCITUATE	State RI	City	State
Zip		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.

FILED

File Date **JUN 22 2011**

Check No. **14705D**

BY **14705D**

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 **JOSEPH FEULA** Date **5/25/11**

Print or Type Name of Officer **JOSEPH FEULA**

Title of Officer **PRES.**