



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.** 000026436

**2. Name of Corporation** Hog Island Improvement Association

**3. State of Incorporation**

State: RI

**4. Corporate Address in Rhode Island**

No. and Street: 50 RIDGE ROAD

City or Town: BRISTOL State: RI Zip: 02809 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**

ASSOCIATION OF MEMBERS FOR IMPROVEMENT OF SUMMER COLONY.

**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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
PRESIDENT	EARL SWEENEY MR.	PO BOX 131 BELMONT, NH 03220 USA
TREASURER	MARY CONVERTINO	1489 NEW SCOTLAND SLINGERLANDS, NY 12159 USA
SECRETARY	CHERYL A IVATTS MRS.	70 SHUFELT RD. SOUTH WALPOLE, MA 02071 USA
VICE PRESIDENT	SUE SEXTON	91 SISSON ST. E. HARTFORD, CT 06118 USA
DIRECTOR	PATRICK MAHER	4 FEM ST NATICK, MA 01760 USA
DIRECTOR	CHERYL IVATTS	PO BOX 132 SOUTH WALPOLE, MA 02071 USA
DIRECTOR	EARL SWEENEY MR.	PO BOX 131 BELMONT, NH 03220 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

DOROTHY L. MOREN 50 RIDGE ROAD BRISTOL , RI 02809

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

**Signed this 28 Day of June, 2011 at 10:08:03 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 CHERYL IVATTS  
Signature of Officer of the Corporation

President or  Vice President or  Secretary or  Assistant Secretary or  
 Treasurer or  Receiver or  Trustee (check one)

**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