

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.	2. Name of Corporation	1				
418983		E CONDOMINIUM				
3. State of Incorporation	4. Corporate address in	Rhode Island - Street	Address	,		
Rhode Island	196 Ocean Roa	d		Narragansett	RI	
5. Foreign corporation. Ente	er principal office address		СНу	State	^{Zip} 02882	
6. Brief Description of the char	ractor of the affairs which are a	ctually conducted in R	bode Island			
7 NAMES AND ADDR	ESSES OF THE OFFICED	C. C"V" DOV DOD A	TTACHMENT) - EILL IN CDAC	TEC DEPODE HOME ATT	A CHIMENITE	
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR AT President Name			Vice President Name			
Michael Finn			Janice Lentz			
Street Address			Street Address			
200 Clarke Road, Unit A 110			200 Clarke Road, Unit A 108			
City	State	Zip	City	State	Zip	
Narragansett	Rhode Island	02882	Narragansett	Rhode Island	02882	
Secretary Name	Trillode Island	102002	Treasurer Name	1 Milode Island	102002	
Regina Wilcox			Rosemarie Wyllie			
Street Address			Street Address			
200 Clarke Road, Ur	nit A 307		190 Clarke Road, U	nit B 104		
City	State	Ztp	City	State	Zip	
Narragansett	Rhode Island	02882	Narragansett	Rhode Island	02882	
	ESSES OF THE DIRECTO	RS: ("X" BOX FOR	ATTACHMENT) TILL IN SPACE	CES BEFORE USING ATT	ACHMENTS	
			ND) CORPORATION SHALL			
Director Name			Director Name			
Joan McKenna			Janice Lentz			
Street Address			Street Address			
190 Clarke Road, Unit B 201			200 Clarke Road, Unit A 108			
СЦу	State	Zip	City	State	Zip	
Narragansett	Rhode Island	02882	Narragansett		02882	
Director Name			Director Name			
Regina Wilcox			Rosemarie Wyllie			
Street Address			Street Address	*** \		
200 Clarke Road, Ur	nit A 307		190 Clarke Road, U	Jnit B 104		
City	State	Zip	City	State	Zip	
Narragansett	Rhode Island	02882	Narragansett	Rhode Island	02882	
9. REGISTERED AGENT	T IN RHODE ISLAND - 1	DO NOT ALTER -	Changes require filing of Fo	orm 641 - R.I.G.L. 7-6-13	/ 7-6-78	
Agent Name			Address			
James H Reilly			28 Caswell Street			
Address			City	Zip		
			Narragansett	0288	32	
ATU :						
This report	must be signed by either	the President, Vic	e President, Secretary, Assistan	it Secretary, Treasurer, Re	ceiver or Trustee	

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E'I D	FILED
File Date _ Check No.	FEB 1 3 2012
By. BY _	1395_
F	OR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined	
report, including any accompanying schedules and statements, and th	at all
statements contained herein are true and correct.	
Michael 11- 2/10/20	ı ?
Signature of Officer Date	
Michael Finn	
Print or Type Name of Officer	**********
President	
Title of Officer	

Form 631 Rev. 12/06