



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State - Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2012

Filing Period: June 1 - June 30 • This report must be typed or printed legibly.

Filing Fee: \$20.00 • FAILURE TO FILE THIS REPORT BY JULY 30 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. <u>44884</u>		2. Exact name of the Corporation <u>PINECREST FARM ESTATES OWNER'S ASSOCIATION, INC.</u>			
3. State of Incorporation <u>RI</u>		4. Corporate Address in RI - Street Address <u>8 PINECREST ROAD</u>		City <u>CAROLINA</u>	Zip <u>02812</u>
5. Foreign corporation. Enter principal office address			City	State	Zip
6. Brief description of the character of business conducted in Rhode Island <u>HOMEOWNER'S ASSOCIATION</u>					
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name <u>KENNETH F. PAYNE</u>			Vice-President Name <u>RICHARD HOSKINS</u>		
Street Address <u>8 PINECREST ROAD</u>			Street Address <u>3 PINECREST ROAD</u>		
City <u>CAROLINA</u>	State <u>RI</u>	Zip <u>02812</u>	City <u>CAROLINA</u>	State <u>RI</u>	Zip <u>02812</u>
Secretary Name <u>PAUL GAMWELL</u>			Treasurer Name <u>DAVID MOULTROP</u>		
Street Address <u>5 PINECREST ROAD</u>			Street Address <u>4 PINECREST ROAD</u>		
City <u>CAROLINA</u>	State <u>RI</u>	Zip <u>02812</u>	City <u>CAROLINA</u>	State <u>RI</u>	Zip <u>02812</u>
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name <u>KENNETH F. PAYNE</u>			Director Name <u>RICHARD HOSKINS</u>		
Street Address <u>8 PINECREST ROAD</u>			Street Address <u>3 PINECREST ROAD</u>		
City <u>CAROLINA</u>	State <u>RI</u>	Zip <u>02812</u>	City <u>CAROLINA</u>	State <u>RI</u>	Zip <u>02812</u>
Director Name <u>PAUL GAMWELL</u>			Director Name <u>DAVID MOULTROP</u>		
Street Address <u>5 PINECREST ROAD</u>			Street Address <u>4 PINECREST ROAD</u>		
City <u>CAROLINA</u>	State <u>RI</u>	Zip <u>02812</u>	City <u>CAROLINA</u>	State <u>RI</u>	Zip <u>02812</u>
9. REGISTERED AGENT IN RHODE ISLAND					
This information is currently of record in the Office of the Secretary of State. Changes require filing Form 641.					

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

File Date _____

Check No _____

By: _____

FOR SECRETARY OF STATE USE ONLY

CH # 183

FILED

JUN 04 2012

By [Signature]

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] 6-1-12
 Signature of Officer Date

DAVID MOULTROP
 Print or Type Name of Officer

TREASURER
 Title of Officer