



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/business

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>109630</u>		2. Exact name of the Corporation <u>Cedar Spring Terrace Tenants Ass.</u>	
3. State of Incorporation <u>R.I</u>		4. Brief description of the character of business conducted in Rhode Island <u>Senior Complex Housing Bingo - Parties etc</u>	
5. Principal office address <u>10 Cheryl Dr #301</u>		City <u>Johnston</u>	State <u>R.I.</u>
		Zip <u>02919</u>	
6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			
President Name <u>Dolores Dickervitz</u>		Vice-President Name <u>ELENA ANZEVINO</u>	
Street Address <u>10 Cheryl Dr Apt 303</u>		Street Address <u>10 Cheryl Dr Apt 203</u>	
City <u>Johnston</u>	State <u>R.I</u>	City <u>Johnston</u>	State <u>RI</u>
Zip <u>02919</u>		Zip <u>02919</u>	
Secretary Name <u>Verna Russillo</u>		Treasurer Name <u>Julie Devlin</u>	
Street Address <u>10 Cheryl Dr. Apt 603</u>		Street Address <u>10 Cheryl Dr. Apt 112</u>	
City <u>Johnston</u>	State <u>R.I</u>	City <u>Johnston</u>	State <u>R.I</u>
Zip <u>02919</u>		Zip <u>02919</u>	
7. 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>Dolores Dickervitz</u>		Director Name <u>Julie Devlin</u>	
Street Address <u>10 Cheryl Dr #303</u>		Street Address <u>10 Cheryl Dr. #112</u>	
City <u>Johnston</u>	State <u>R.I</u>	City <u>Johnston</u>	State <u>RI</u>
Zip <u>02919</u>		Zip <u>02919</u>	
Director Name <u>Verna Russillo</u>		Director Name	
Street Address <u>10 Cheryl Dr #603</u>		Street Address	
City <u>Johnston</u>	State	City	State
Zip <u>02919</u>		Zip	
8. 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: _____

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BY 509

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.

Dolores Dickervitz 6/30/12
 Signature of Officer Date

Dolores Dickervitz
 Print or Type Name of Officer

President
 Title of Officer