



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: 2013

1. Corporate ID No. 000009966

2. Name of Corporation The Village at Wardens Pond Homeowners Assoc. Inc.

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 434 LEISURE DRIVE

City or Town: WAKEFIELD

State: RI

Zip: 02879

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

NEGOTIATE FOR, ACQUIRE AND OPERATE A MOBILE HOME PARK ON BEHALF OF THE MEMBER RESIDENTS

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	WILLIAM CAHILL	11 STELLAR WAY WAKEFIELD, RI 02879 USA
TREASURER	RUTH FIDDES	411 LEISURE DR WAKEFIELD, RI 02879 USA

SECRETARY	LINDA HULL	17 HEALEY BROOK CT WAKEFIELD, RI 02879 USA
VICE PRESIDENT	BRUCE FROMM	395 LEISURE DR WAKEFIELD, RI 02879 USA
DIRECTOR	EILEEN ULLRICH	427 LEISURE DR WAKEFIELD, RI 02879 USA
DIRECTOR	LOIS KEENAN	355 LEISURE DR WAKEFIELD, RI 02879 USA
DIRECTOR	PATRICK NOONAN	180 LITTLE POND RD WAKEFIELD, RI 02879 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**

REGINA MAXWELL 14 LITTLE POND ROAD BOX N-2 WAKEFIELD , RI 02879

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

Signed this 27 Day of June, 2013 at 9:40:28 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 LINDA K. HULL
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

© 2007 - 2013 State of Rhode Island and Providence Plantations
All Rights Reserved