



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 2014

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. 164051		2. Exact name of the Corporation The Grand Canyon Condominium Association, Inc			
3. State of Incorporation RI		4. Corporate Address in RI - Street Address 107 medway street #B		City Providence	Zip 02906
5. Foreign corporation. Enter principal office address			City	State	Zip
6. Brief description of the character of business conducted in Rhode Island Condo Association					
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name David Zawacki			Vice-President Name Amy Pavia-Zawacki		
Street Address 107 medway street #B			Street Address 107 medway street #B		
City Providence	State RI	Zip 02906	City Providence	State RI	Zip 02906
Secretary Name Amy Pavia Zawacki			Treasurer Name David Zawacki		
Street Address 107 medway street #B			Street Address 107 medway street #B		
City Providence	State RI	Zip 02906	City Providence	State RI	Zip 02906
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 David Zawacki			Director Name Amy Pavia-Zawacki		
Street Address 107 medway street #B			Street Address 107 medway street #B		
City Providence	State RI	Zip 02906	City Providence	State RI	Zip 02906
Director Name Joseph Piccardi			Director Name		
Street Address Two Damien Ct			Street Address		
City North Providence	State RI	Zip 02911	City	State	Zip
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.					

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 STATE OF RHODE ISLAND
 CORPORATIONS DIV

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

File Date _____

Check No _____

By: _____ JUN 10 2014

FOR SECRETARY OF STATE USE ONLY

By: aa6019
A.A.

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 of Officer: [Signature] Date: 6/10/14
 Print or Type Name of Officer: David Zawacki
 Title of Officer: Condominium President