



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. <u>30878</u>		2. Exact name of the Corporation <u>COTTRELL PIER ASSOCIATION, INC.</u>	
3. State of Incorporation <u>RI</u>		4. Brief description of the character of business conducted in Rhode Island <u>SWIMMING BEACH</u>	
5. Principal office address <u>P.O. BOX 514</u>		City <u>JAMESTOWN</u>	State <u>RI</u> Zip <u>02935</u>
6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>			
President Name <u>ROBERT SEDREWICK</u>		Vice-President Name <u>PRIMROSE BULLOCK</u>	
Street Address <u>144 WALCOTT AVE</u>		Street Address <u>121 RACQUET RD</u>	
City <u>JAMESTOWN</u>	State <u>RI</u>	Zip <u>02935</u>	City <u>JAMESTOWN</u> State <u>RI</u> Zip <u>02935</u>
Secretary Name <u>CAT DUNNING</u>		Treasurer Name <u>FRITZ ATTAWAY</u>	
Street Address <u>11 AVE B</u>		Street Address <u>13 DELATUR AVE</u>	
City <u>JAMESTOWN</u>	State <u>RI</u>	Zip <u>02935</u>	City <u>JAMESTOWN</u> State <u>RI</u> Zip <u>02935</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>VICTORIA V. VALENTINE</u>		Director Name <u>DAN O'DONNELL</u>	
Street Address <u>3 MEADOW LANE</u>		Street Address <u>192 RACQUET RD</u>	
City <u>JAMESTOWN</u>	State <u>RI</u>	Zip <u>02935</u>	City <u>JAMESTOWN</u> State <u>RI</u> Zip <u>02935</u>
Director Name <u>KIMBERLY WESCOTT</u>		Director Name <u>DAVID FITZGERALD</u>	
Street Address <u>2 MAYWOOD RD</u>		Street Address <u>154 RACQUET RD</u>	
City <u>DARIEN</u>	State <u>CT</u>	Zip <u>06820</u>	City <u>JAMESTOWN</u> State <u>RI</u> Zip <u>02935</u>
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, duly Authorized Representative, Receiver or Trustee

File Date _____

Check No _____

By: _____

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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.

JUN 12 2014

BY 3311 Fritz E. Attaway Signature of Officer or Authorized Representative Date 6/6/14

FRITZ E. ATTAWAY
 Print or Type Name of Officer or Authorized Representative

Additional Officer:

Vice-President

John Austin Murphy
77 Narragansett Ave.
Jamestown, RI 02835

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JUN 12 2014

BY # 30878