



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: 2014

1. Corporate ID No. 000134528

2. Name of Corporation Berkeley Commons Condominium Association

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 573 MENDON ROAD
SUITE 1

City or Town: CUMBERLAND State: RI Zip: 02864 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

TO PROVIDE FOR THE OPERATION, ADMINISTRATION, USE AND MAINTENANCE OF THE CONDOMINIUM UNITS AND COMMON AREAS WITHIN A CERTAIN PARCEL OF REAL ESTATE LOCATED IN CUMBERLAND, RI

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	HARRY HICKEY	500 MENDON ROAD, UNIT 120 CUMBERLAND, RI 02864 USA

DIRECTOR	ANDREA BELLISLE	500 MENDON ROAD, UNIT 223 CUMBERLAND, RI 02864 USA
DIRECTOR	GREG SCOWN	500 MENDON ROAD, UNIT 108 CUMBERLAND, RI 02864 USA
DIRECTOR	HENRY MARSELLA	500 MENDON ROAD, UNIT 204 CUMBERLAND, RI 02864 USA
DIRECTOR	MARC JOHNSON	500 MENDON ROAD, UNIT 127 CUMBERLAND, RI 02864 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

THOMAS J. MOYLAN, ESQ. 50 EXCHANGE TERRACE, SUITE 320 PROVIDENCE , RI 02903-

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

Signed this 24 Day of June, 2014 at 12:53:54 PM by the authorized person. *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 company, 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 MATTHEW COPPA
Signature of Authorized Person

Form No. 631
Revised 09/07