RI SOS Filing Number: 201442010200 Date: 06/27/2014 10:38 AM

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. 000052688

2. Name of Corporation River Farms Condominium Association, Inc.

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 1 KRYSTAL POND DRIVE
City or Town: WEST WARWICK State: RI Zip: 02893 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

CONDOMINIUM ASSOCIATION

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	ROBERT SCALZI	1 QUEEN ANNES CT. WEST WARWICK, RI 02893 USA
TREASURER	RONALD JOSEPH	CARNIVAL TERRACE WEST WARWICK, RI 02893 USA
SECRETARY	DAVID MORIARTY	12 STARLING WAY

0-8011-0

		WEST WARWICK, RI 02893 USA
VICE PRESIDENT	MATTHEW FRANCIS	CARNIVAL TERRACE WEST WARWICK, RI 02893 USA
DIRECTOR	JOHN SOUZA	RIVER FARMS DR. WEST WARWICK, RI 02893 USA
DIRECTOR	HOWARD NESBITT	17 CARNIVAL TERRACE WEST WARWICK, RI 02893 USA
DIRECTOR	JEFFREY DAVIS	101 RIVER FARMS DRIVE WEST WARWICK, RI 02893 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

KAREN A. BELLUCCI SELECTIVE PROP. MANAGEMENT INC. 17 MANN SCHOOL ROAD SMITHFIELD , RI 02917

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

Signed this 27 Day of June, 2014 at 10:40:55 AM 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 ROBERT SCALZI, PRESIDENT
Signature of Authorized Person

Form No. 631
Revised 09/07