

## 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: 2015** 

1. Corporate ID No. 000153749

2. Name of Corporation South Pier Farm Homeowners Association

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 9 THAYER AVENUE

City or Town: NARRAGANSETT State: RI Zip: 02882 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 OWN, OPERATE AND MAINTAIN COMMON AREAS OF SOUTH PIER FARM

## 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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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             | Address   |
|--------------------|-----------------------------|---|
|                    | First, Middle, Last, Suffix | Address, City or Town, State, Zip Code, Country |
| DIRECTOR/TREASURER | NATALIE LEVESQUE            | 9 THAYER AVE.<br>NARRAGANSETT, RI 02882 USA     |
| DIRECTOR/PRESIDENT | PETER SMITH                 | 35 THAYER AVE.<br>NARRAGANSETT, RI 02882 USA    |
| DIRECTOR           | ROBERT FLYNN                | 3 JESSICA LANE                                  |

| NARRAGANSETT. RI | U2882 | 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

NATALIE LEVESQUE, CPA 9 THAYER AVENUE NARRAGANSETT, RI 02882

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

**Signed this 12 Day of May, 2015 at 11:30:34 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 NATALIE LEVESQUE Signature of Authorized Person

Form No. 631 Revised 09/07

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