



**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. 000026368

2. Name of Corporation Hill Pasture Improvement Association

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 75 B POND STREET, PO BOX 730

City or Town: CHARLESTOWN

State: RI Zip: 02813 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

ASSOCIATION OF PROPERTY OWNERS FOR THE MAINTENANCE OF COMMON GROUNDS.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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
TREASURER	LAWSON WILLIAM DURFEE MR	75 B POND STREET CHARLESTOWN, RI 02813 US
SECRETARY	RACHEL LYONS MRS	6 POND STREET CHARLESTOWN, RI 02813 US

PRESIDENT	PATRICK LYONS MR	6 POND STREET CHARLESTOWN, RI 02813 US
VICE PRESIDENT	MILDRED PILCH MS	70 POND STREET CHARLESTOWN, RI 02813 US
DIRECTOR	STEVE SCHAUS MR	65 POND STREET, POBOX1378 CHARLESTOWN, RI 02813 US
DIRECTOR	LAWSON WILLIAM DURFEE MR	75 B POND STREET CHARLESTOWN, RI 02813 US
DIRECTOR	ROLAND STERN MR	64 POND STREET CHARLESTOWN, RI 02813 US

**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**

RON MELLO 56 POND STREET P.O. BOX 1418 CHARLESTOWN , RI 02813

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

Signed this 26 Day of May, 2015 at 3:48:14 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 LAWSON DURFEE
Signature of Authorized Person

Form No. 631
Revised 09/07

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