



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. 000158747

2. Name of Corporation Country Lane Estates Condominium Association, Inc.

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 100 JEFFERSON BLVD. STE 205

City or Town: WARWICK

State: RI Zip: 02888 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

OPERATION AND MAINTENANCE OF THE COUNTRY LANE ESTATES CONDOMINIUM

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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
SECRETARY	MICHAEL MINEAU	300 SMITHFIELD RD, BLDG 7, TH8 NORTH PROVIDENCE, RI 02904 USA
DIRECTOR	WILLIAM SCHUELLEIN	5 DINARO DRIVE SMITHFIELD, RI 02917 USA
DIRECTOR	KEITH PRUE	PO BOX 114117

		NORTH PROVIDENCE, RI 02911 USA
TREASURER	KEITH PRUE	PO BOX 114117 NORTH PROVIDENCE, RI 02911 USA
VICE PRESIDENT	STEPHANIE CORSETTI	466 MATTITY RD NORTH SMITHFIELD, RI 02896 USA
DIRECTOR	STEPHANIE CORSETTI	466 MATTITY RD NORTH SMITHFIELD, RI 02896 USA
PRESIDENT	KEITH PRUE	PO BOX 114117 NORTH PROVIDENCE, RI 02911 USA
DIRECTOR	MICHAEL MINEAU	300 SMITHFIELD RD, BLDG 7, TH8 NORTH PROVIDENCE, RI 02904 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**

FRANK A. LOMBARDI, ESQ. 14 BREAKNECK HILL ROAD, SUITE 203 LINCOLN , RI 02865

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

Signed this 5 Day of June, 2015 at 2:57:30 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 KEITH PRUE
Signature of Authorized Person

Form No. 631
Revised 09/07

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