



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.** 000153375

**2. Name of Corporation** Hawk Crest Estates Homeowners Association, Inc.

**3. State of Incorporation**

State: RI

**4. Corporate Address in Rhode Island**

No. and Street: P.O. BOX 818  
City or Town: COVENTRY State: RI Zip: 02816 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**

HOMEOWNER'S 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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**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	BRUCE SHAFFER	29 NORTH UP PLAT ROAD COVENTRY, RI 02816 USA
TREASURER	ROSEANN READ	12 NORTHUP PLAT ROAD COVENTRY , RI 02816 USA
SECRETARY	MELANIE LINKEVICH	11 NORTHUP PLAT ROAD

		COVENTRY, RI 02816 USA
VICE PRESIDENT	JOESPH BARIS	10 NORTHUP PLAT ROAD COVENTRY, RI 02816 USA
DIRECTOR	KEN NORBERG	25 NORTHUP PLAT RD COVENTRY, RI 02816 USA
DIRECTOR	TOLGA KOKTRUCK DR.	27 NORTHUP PLAT COVENTRY, RI 02816 USA
DIRECTOR	KEN READ	12 NORTHUP PLAT ROAD COVENTRY, RI 02816 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**

JOHN S. BRUNERO, JR. 1070 MAIN STREET COVENTRY , RI 02816

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

**Signed this 8 Day of June, 2015 at 8:48:04 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 MELANIE LINKEVICH  
Signature of Authorized Person

Form No. 631  
Revised 09/07