Filing Fee: \$20.00

To be filed annually during the month of June



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State Corporations Division 100 North Main Street Providence, Rhode Island 02903-1335 Telephone (401) 222-3040

NON-PROFIT CORPORATION			
Co	rporate ID Number <u>ND-80</u>	300	Annual Report for the year 1999
1.	The name of the corporation is Eagle's Nest Condominium Association, Inc.		
2.	The state or other jurisdic	tion under the law	s of which it is incorporated is Rhode Island
3.		ered office of the	corporation in this state is MANAGEMENT, INC. 808 QUAKER LANE
	and the name of its regis	tered agent in this	s state at that address is PHOENIX PROPERTY
4.	4. The character of the affairs which it is actually conducting in Rhode Island, briefly stated, is		
			n
5	If a foreign corporation, the incorporated is		rincipal office in the state or other jurisdiction under the laws of which it is
6.	Corporate address in Rhode Island Eagle's Nest Condominium Association, TnC/o		
			t. 808 Quaker Ln., E. Greenwich, RI 02818
 Names and addresses of its directors and officers: (In compliance with 7-6-23 of the R.I.G.L. 1956, as amended, the number of directors of a domestic (Rhode Island) corporation shall not be less than three (3).) 			
	NAME	OFFICE	ADDRESS
Sta	nley Slowick	Director	12B Eagle Run, E. Greenwich, RI 02818
Frai	nk Kutz	Director	41A Recla Run. R. Greenwick, RT 02818
<u>J</u> ā	ane Nichols	Director	Ex Officio 46A Eagle Run, F. Greenwich, RI 02818
St	anley Slowick	Tibbludin	12B Fagle Run, E. Greenwich, KI UZDIO
Fra	ank Kutz S	Vice-President	41A Eagle Run, E. Greenwich, RI 02818
Car	rol Delack	Secretary	16B Fagle Run, F. Greenwich, RI 02818
Maı	rilyn Serra	Treasurer —	124 Eagle Run, E. Greenwich, RI 02818
Dated: June 1, 1999		<u> </u>	Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.
			Eagle's Nest Condominium Association Exact Name of Corporation
FOR SECRETARY OF STATE USE ONLY File Date:			By Stanley Slowerk
Check No.:			(Report must be signed by an officer)
By:			Form No. NP-13 Revised 5/98

