



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. 000503797

2. Name of Corporation IRVING SLATER LANDING CONDOMINIUM ASSOCIATION

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 184 IRVING AVENUE, #2

City or Town: PROVIDENCE

State: RI Zip: 02906 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

THE PURPOSE OF THE IRVING SLATER LANDING CONDOMINIUM ASSOCIATION IS TO BE THE ASSOCIATION TO WHICH REFERENCE IS MADE IN THE DECLARATION OF THE IRVING SLATER LANDING CONDOMINIUM ASSOCIATION LOCATED IN THE CITY OF PROVIDENCE, COUNTY OF PROVIDENCE, STATE OF RHODE ISLAND, AND TO PROVIDE AN ENTITY FOR THE FURTHERANCE OF THE INTERESTS OF THE UNIT OWNERS. THE ASSOCIATION SHALL HAVE THE RESPONSIBILITY OF ADMINISTERING THE CONDOMINIUM, ESTABLISHING THE MEANS AND METHODS OF COLLECTING ASSESSMENTS AND CHARGES, ARRANGING FOR THE MANAGEMENT OF THE CONDOMINIUM AND PERFORMING ALL OTHER ACTS THAT MAY BE REQUIRED OR PERMITTED TO BE PERFORMED BY THE ASSOCIATION PURSUANT TO THE ACT AND THE DECLARATION. EXCEPT AS TO THOSE MATTERS, WHICH THE ACT SPECIFICALLY REQUIRES TO BE PERFORMED BY THE VOTE OF THE ASSOCIATION, THE FOREGOING RESPONSIBILITIES SHALL BE PERFORMED BY THE EXECUTIVE BOARD OR THE MANAGING AGENT AS MORE PARTICULARLY SET FORTH IN THESE BY-LAWS.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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 | CYNTHIA MARGARET BERTOZZI | 184 IRVING AVE PROVIDENCE, RI 02906 USA |
| DIRECTOR | MICHAEL NISSENSOHN | 1 SLATER PROVIDENCE, RI 02906 USA |
| DIRECTOR | ANDREW LISON | 186 IRVING AVE #3 PROVIDENCE, RI 02906 USA |
| DIRECTOR | CYNTHIA BERTOZZI | 184 IRVING AVE #2 PROVIDENCE, RI 02906 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**

ANDREW LISON 186 IRVING AVENUE, #3 PROVIDENCE , RI 02906

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

Signed this 17 Day of June, 2015 at 7:04:37 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 CYNTHIA BERTOZZI
Signature of Authorized Person

Form No. 631
Revised 09/07

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