STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State - Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040 ~ **Email:** corporations@sos.ri.gov ~ **Website:** www.sos.ri.gov

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2015

Filing Period: June 1 - June 30 • **This report must be typed or printed legibly.**
Filing Fee: $20.00 • **FAILURE TO FILE THIS REPORT BY JULY 30 WILL RESULT IN A $25.00 PENALTY FEE.**

1. Entity ID No.	2. Exact name of the Corporation
124422	**Country View Citizens Association**
3. State of Incorporation	4. Brief description of the character of business conducted in Rhode Island
RI	**Serve as a source of information to citizens living in Country View Estates, promote community involement and qualify for right of first refusal on the sale of Country View Estates.**

5. Principal office address	City	State	Zip
71 Blackbird Street	**Tiverton**	**RI**	**02878-2398**

6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) ☐

President Name	Street Address	City	State	Zip
Al Affonso	**71 Blackbird Street**	**Tiverton**	**RI**	**02878**

Vice-President Name	Street Address	City	State	Zip
Betty Willis	**20 Blackbird Circle**	**Tiverton**	**Ri**	**02878**

Secretary Name	Street Address	City	State	Zip
Constance Anderson	**89 Songbird Lane**	**Tiverton**	**RI**	**02878**

Treasurer Name	Street Address	City	State	Zip
Roger Riendeau	**149 Lark Lane**	**Tiverton**	**RI**	**02878**

7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) ☐

Director Name	Street Address	City	State	Zip
Steven Anderson	**89 Songbird Lane**	**Tiverton**	**RI**	**02878**

Director Name	Street Address	City	State	Zip
Maureen Brown	**47 Red Tail Trail**	**Tiverton**	**RI**	**02878**

Director Name	Street Address	City	State	Zip
Claudia DiGiovanni	**12 Cardinal Court**	**Tiverton**	**RI**	**02878**

Director Name	Street Address	City	State	Zip

8. REGISTERED AGENT IN RHODE ISLAND
This information is currently of record in the Office of the Secretary of State. Changes require filing Form 641.

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

2015 JUN 19 AM 9:57 SECRETARY OF STATE

File Date _____ **FILED**
Check No _____ JUN 19 2015
By: _____ 251248
FOR SECRETARY OF STATE USE ONLY By: A.A.

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.

Signature of Officer or Authorized Representative — Date 6/14/15

Al Affonso - President
Print or Type Name of Officer or Authorized Representative

Form No. 631
Revised: 04/2014