



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.** 000040343

**2. Name of Corporation** RUMFORD TOWERS RESIDENTS ASSOCIATION

**3. State of Incorporation**

State: RI

**4. Corporate Address in Rhode Island**

No. and Street: 95 NEWMAN AVENUE

N311

City or Town: RUMFORD

State: RI Zip: 02916 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**

HOUSING FOR THE ELDERLY

**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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**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	THOMAS P HARRINGTON	95 NEWMAN AVE. #311 RUMFORD, RI 02916 USA
TREASURER	GORDON REELS	105 NEWMAN AVE. #1009 RUMFORD, RI 02916 USA

SECRETARY	LUCINDA ASHMAN	95 NEWMAN AVE. #209 RUMFORD, RI 02916 USA
VICE PRESIDENT	HAROLD GREENE	95 NEWMAN AVE. #1111 RUMFORD, RI 02916 USA
DIRECTOR	GAIL RYAN	95 NEWMAN AVE. #311 RUMFORD, RI 02916 USA
DIRECTOR	ROSEANN ARNOLD	95 NEWMAN AVE. #710 RUMFORD, RI 02916 USA
DIRECTOR	BARBARA KURCZAP	105 NEWMAN AVE. #603 RUMFORD, RI 02916 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**

THOMAS P HARRINGTON 95 NEWMAN AVENUE, APT. 606 RUMFORD , RI 02916

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

**Signed this 27 Day of June, 2015 at 12:29:10 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 THOMAS P. HARRINGTON  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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