



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Matthew A. Brown, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401.222.3040

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

Filing Period: June 1 - June 30 • Filing Fee: \$20.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. <u>113300</u>	2. Name of Corporation <u>West moreland Farm Homeowners Association Inc.</u>		
3. State of Incorporation <u>Rhode Island</u>	4. Corporate address in Rhode Island - Street Address <u>21 Garden City Drive</u>	City <u>Cranston</u>	Zip <u>02920</u>
5. Foreign corporation: Enter principal office address City State Zip			

6. Brief Description of the character of the affairs which are actually conducted in Rhode Island
Acquiring real estate in North Kingstown, RI to be used for recreational or conservation purposes

7. NAMES AND ADDRESSES OF THE OFFICERS (CHECK BOX FOR ATTACHMENT) ☐ ATTACHMENT ☒ FULL IN SPACES BEFORE USING ATTACHMENTS

President Name <u>Jeffery Conticello</u>	Vice President Name <u>Paul Plotkin</u>
Street Address <u>369 Westmoreland Lane</u>	Street Address <u>31 Jasmine Circle</u>
City <u>Saunderstown</u>	City <u>Saunderstown</u>
State <u>RI</u>	State <u>RI</u>
Zip <u>02874</u>	Zip <u>02874</u>
Secretary Name <u>Elke Schaumberg</u>	Treasurer Name <u>Brian Sherman</u>
Street Address <u>527 Westmoreland Lane</u>	Street Address <u>23 Jasmine Circle</u>
City <u>Saunderstown</u>	City <u>Saunderstown</u>
State <u>RI</u>	State <u>RI</u>
Zip <u>02874</u>	Zip <u>02874</u>

8. NAMES AND ADDRESSES OF THE DIRECTORS (CHECK BOX FOR ATTACHMENT) ☐ ATTACHMENT ☒ FULL IN SPACES BEFORE USING ATTACHMENTS

THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (R.I.G.L. 7-6-23)

Director Name <u>Jeffery Conticello</u>	Director Name <u>Maurice Chesney</u>
Street Address <u>369 Westmoreland Lane</u>	Street Address <u>218 Westmoreland Lane</u>
City <u>Saunderstown</u>	City <u>Saunderstown</u>
State <u>RI</u>	State <u>RI</u>
Zip <u>02874</u>	Zip <u>02874</u>
Director Name <u>Elke Schaumberg</u>	Director Name <u>Paul Plotkin</u>
Street Address <u>527 Westmoreland Ln</u>	Street Address <u>31 Jasmine Circle</u>
City <u>Saunderstown</u>	City <u>Saunderstown</u>
State <u>RI</u>	State <u>RI</u>
Zip <u>02874</u>	Zip <u>02874</u>

9. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 641-R (01/7-6-13/7-6-18)

Agent Name <u>Robert D. Murray</u>	Address <u>21 Garden City</u>
Address <u>Cranston</u>	Zip <u>02920</u>

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

File Date <u>9/15/05</u>
Check No. <u>781</u>
By: <u>DA</u>
FOR SECRETARY OF STATE USE ONLY

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 <u>Elke C. Schaumberg</u>	Date <u>9/9/05</u>
Print or Type Name of Officer <u>secretary</u>	Title of Officer