

1. Entity ID No.

3. State of Incorporation

## 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 \_ 2014

ghborhood Association

Filing Period: June 1 - June 30 • This report must be typed or printed legibly.

2. Exact name of the Corporation

Filing Fee: \$20.00 • FAILURE TO FILE THIS REPORT BY JULY 30 WILL RESULT IN A \$25.00 PENALTY FEE.

4. Brief description of the character of business conducted in Rhode Island

5. Principal office address  6. LIST ALL OFFICERS (NAMES AND ADDRESSES) (FX BOX FOR ATTACHMENT)  President Name  Erin Taylor  Street Address  Street Address  Street Address  Secretary Name  Street Address  City Warwick  State  Treasurer Name  City Warwick  State  Treasurer Name  Street Address  City Warwick  State  To 2888  T. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS  ("X" BOX FOR ATTACHMENT)  Director Name  Erin Taylor  Street Address  Street	RI Neighborhood group-Social activities				
E. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT)  President Name  EY IN TOUGH VICE TO President Name  EY IN TOUGH VICE TO PROBLEM VINCE AT A POLE TYCE Lane  City Varue & State Zip 02888  Secretary Name  A pole Tyce Lane  City Varue & State Zip 02888  Secretary Name  Street Address  (a) Y A a pole In Zip 02888  City Varue & State Zip 02888  7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT)  Director Name  EY IN TOUGH & State Zip 02888  City Varue & State Zip 02888  Director Name  Linda & A anguin Dy  City Varue & State Zip 02888  Director Name  Linda & A anguin Dy  City Varue & State Zip 02888  Director Name  Linda & A anguin Dy  City Varue & State Zip 02888  Director Name  Linda & A anguin Dy  City Varue & State Zip 02888  Breet Address  A REGISTERED AGENT IN RHODE ISLAND  This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Pappaker or Trustee  FILED  Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements chritained herein are true and correct.  Check No  AS 101 NY S 1 100 8182  PAR A 232462  Martin Individual And Individual Accompanying schedules and statements, and that all statements chritained herein are true and correct.	5. Principal office address	<u> </u>	City	State Zin	
President Name  Erin Taylor  Street Address  Street Address  Screetary Name  City  War wirk  State  City  Name  Street Address  Screetary Name  Street Address  City  War wirk  State  City  War wirk  State  City  War wirk  Street Address				Kt 05988	
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Street Address (OU A Q ONG VIN DV STABLE DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS (NY BOX FOR ATTACHMENT)  Director Name  EY IN  Street Address  Stre		02888	Cilwarwick	State Zip 02888	
Street Address (OUY ALQ DIG VIN DV STATE TO STAT	Secretary Name	Cilv	Treasurer Name		
City War with State I I I Director Name Dire	Inda Eichenteldt				
City Warvick State To 0.888 City Warvick State To 0.888  7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT)  Director Name  Fry To Toylor  Street Address Ju Apple Tree Lane  City Warvick State To 0.888  City Warvick State To 0.888  Director Name  Lind City Warvick State To 0.888  Director Name  Lind City Warvick State To 0.888  Street Address Ju Apple Tree Lane  City Warvick State To 0.888  Street Address Street Address Ju Apple Tree Lane  City Warvick State To 0.888  Street Address Street Address Street Address Ju Apple Tree Lane  City Warvick State To 0.888  Street Address Street Address Street Address Ju Apple Tree Lane  City Warvick State To 0.888  REGISTERED AGENT IN RHODE ISLAND  This information is currently of record in the Office of the Secretary of State. Changes require filling Form 641.  This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Papalver or Trustee  FILED  Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that fall statements contained herein are true and correct.  Check No  LS: OI NV S. 1.100 EIRZ SV Cu. 25.2462  M. Warvick State To 0.2888  DIRECTORS  Street Address Ju Apple Tree Lane  State To 0.2888  Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that fall statements contained herein are true and correct.  Check No  LS: OI NV S. 1.100 EIRZ	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		Street Address O Dahla St.		
Director Name  EVIN  Street Address  Director Name  Lina  State  City  Warwik  State  City  State  City  State  City  Street Address  Director Name  Lina  Street Address  City  State  City  Warwik  State  Tip  OZ888  City  Warwik  State  City  Warwik  State  Tip  OZ888  Lina  Doz888  Street Address  Street Address  Street Address  City  Warwik  State  Tip  OZ888  Lina  Doz888  Lina  City  Warwik  State  Tip  OZ888  Lina  Doz888  Lina  City  Warwik  Lina  Toze  Toze  State  City  Warwik  City  Warwik  State  City  Warwik  City  Cit	City	Zip 02888	CityWarwilk	State Zip 02888	
Director Name  Evin Taylor  Street Address  Street Address  Y April Trec Lane  City Warwick State I Zip 02888  City Warwick State Zi Zip 02888  Director Name  Linda Eichen Feldt  Director Name  Linda Eichen Feldt  Street Address  GO H Adang vin Dv.  City Warwick State Zip 02888  City Warwick State Zip 02888  City Warwick Street Address  City Warwick State Zip 02888  E. REGISTERED AGENT IN RHODE ISLAND  This information is currently of record in the Office of the Secretary of State. Changes require filling Form 641.  This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Repaiver or Trustee  FILED  Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements cantained herein are true and correct.  Check No  LS: OI NY SI 170 6182  PARA A 257462  WARREL Address  Director Name  Director Name  State Address  Street Address  Street Address  OCT 15 2015	7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT)				
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City Warwick State I I Or888 City Warwick State I I Or888  Director Name  Linda Eichen Feldt  Director Name  Linda Eichen Feldt  Street Address  60 4 Agang vin  City Warwick  Street Address  City Warwick  Street Address  City Warwick  State  Zip Or888  City Warwick  State  Zip Or888  A. 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, Papalver or Trustee  FILED  Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that jall statements cantained herein are true and correct.  Check No  LS:01NV S1.100 C187  PV Au 252462  WWW.W.W.W.W.W.W.W.W.W.W.W.W.W.W.W.W.W	Erin Taulor	•	Ilna V	incent	
City Warwick State ZI ZIP 07888 City Warwick State ZIP 07888  Director Name  Linda Ei Men Feldt  Street Address 604 Agangun Dv.  City Warwick State ZIP 07888  City Warwick State ZIP 07888  REGISTERED AGENT IN RHODE ISLAND  This information is currently of record in the Office of the Secretary of State. Changes require filling Form 641.  This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Repelver or Trustee  FILED  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.  LS:OHW SI 100 8102  RV Cur 252462  WWW. W.	Street Address	~	Street Address	Total	
Director Name  Linda Eichen feldt  Street Address 60 4 Agang Jun  City  Warward  State  City  City  Warward  State  City  Warward  State  City  City  Warward  State  City  City  Warward  State  City  City  Warward  State  City  City  Warward  State  Changes require filing Form 641.  Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that fall statemen	18 Savantun	$\sim 10^{r_1}$	19 1100	e Ivec Lane	
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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  FILED  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.  Check No  LS: 01 HV SI 120 CI02	City	F 210 02888	City Warwick	State Zip 02888	
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This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Repaiver or Trustee  FILED  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.  Check No  LS: 01 HV S1130 C107					
FILED  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.  Check No  LS:01 HV S1130 CI02 PV Cu - 252463 WWWWW 10-6-2015					
File Date  OCT 15 2015  OCT 15 2015  OCT 15 2015  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.  Check No  LS: OI HV SI 130 CIRZ PV Cu - 252462		r-11 == <i>U</i> ^			
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