



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. 000131983

2. Name of Corporation Woodlands Homeowners Association

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 34 SYLVAN WAY

City or Town: KINGSTON

State: RI

Zip: 02881

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

TO DEVELOP A COMMUNITY DESIGNED FOR SAFE, HEALTHFUL AND HARMONIOUS LIVING

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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
TREASURER	DARLENE A ORTOLANO STERN	34 SYLVAN WAY KINGSTON, RI 02881 USA
SECRETARY	BARBARA LUCAS	41 SYLVAN WAY KINGSTON, RI 02881 USA

VICE PRESIDENT	KEVIN J PELTON	87 SYLVAN KINGSTON, RI 02881 USA
PRESIDENT	JOHN E LUCAS	41 SYLVAN WAY KINGSTON, RI 02881- USA
OTHER OFFICER	RON STERN	34 SYLVAN WAY KINGSTON, RI 02881 UNI
DIRECTOR	DR JOSEPH B FITZGERALD	39 SYLVAN WAY KINGSTON, RI 02881 USA
DIRECTOR	GREGORY F. CHILSON JR.	70- SYLVAN WAY KINGSTON, RI 02881 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**

DARLENE ORTOLANO STERN 34 SYLVAN WAY KINGSTON , RI 02881

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

Signed this 8 Day of January, 2016 at 10:20:29 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 DARLENE ORTOLANO STERN
Signature of Authorized Person

Form No. 631
Revised 09/07

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