

to be filed annually during the month of June



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Corporations Division
100 North Main Street Providence, Rhode Island 02903-1335
Telephone (401) 222-3040

NON-PROFIT CORPORATION

Corporate ID Number # 67600
TAX ID 05-047296

Annual Report for the year 1997

- The name of the corporation is THORPE HANE ESTATES HOMEOWNERS ASSOCIATION
- The state or other jurisdiction under the laws of which it is incorporated is Rhode Island
- The address of the registered office of the corporation in this state is, 10 THORPE HANE, WEST KINGSTON, RI. 02892
and the name of its registered agent in this state at that address is Philip E. Tracy
- The character of the affairs which it is actually conducting in Rhode Island, briefly stated, is Homeowners' Association
- If a foreign corporation, the address of its principal office in the state or other jurisdiction under the laws of which it is incorporated is NA
- Corporate address in Rhode Island NA
- Names and addresses of its directors and officers: (In compliance with 7-6-23 of the R.I.G.L. 1956 as amended, the number of directors of a domestic (Rhode Island) corporation shall not be less than three (3).)

RECEIVED DATE
SECRETARY OF STATE
CORPORATIONS DIVISION
OCT 21 12 43 PM '98

NAME	OFFICE	ADDRESS
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<u>Philip E. Tracy</u>	Director	<u>10 THORPE HANE, WEST KINGSTON, RI. 02892</u>
<u>SARAH J. THOMAS-TRACY</u>	Director	<u>10 THORPE HANE, WEST KINGSTON, RI. 02892</u>
<u>ROBERT PERREAU</u>	Director	<u>422 KINGSTOWN RD, WEST KINGSTON, RI. 02892</u>
<u>Philip E. Tracy</u>	President	<u>10 THORPE HANE, WEST KINGSTON, RI. 02892</u>
	Vice-President	
<u>SARAH J THOMAS-TRACY</u>	Secretary	<u>10 THORPE HANE, WEST KINGSTON, RI. 02892</u>
	Treasurer	

Dated: 10/19/99

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.

THORPE HANE ESTATES HOMEOWNERS ASSOCIATION
Exact Name of Corporation

By: Philip E. Tracy
Title President
(Report must be signed by an officer)

FOR SECRETARY OF STATE USE ONLY

File Date: _____

Check No.: _____

By: _____