



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: 2016

1. Corporate ID No. 000143357

2. Name of Corporation Lincoln Mall Condominium Association, Inc.

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: C/O CT CORPORATION SYSTEM
450 VETERAN'S MEMORIAL SUITE 7A

City or Town: EAST PROVIDENCE

State: RI Zip: 02914 Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street: 2809 BUTTERFIELD ROAD

City or Town: OAK BROOK State: IL Zip: 60523 Country: USA

6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island

TO GOVERN THE ADMINISTRATION, REGULATION, USE, OPERATION, MANAGEMENT,
MAINTENANCE AND OCCUPATION OF CERTAIN PROPERTY KNOWN AS THE
LINCOLN MALL CONDOMINIUM IN THE TOWN OF LINCOLN

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
SECRETARY	SHANNON ERLER	2809 BUTTERFIELD ROAD OAK BROOK, IL 60523 USA

PRESIDENT/DIRECTOR	SYLVIA (KRAJNA) PAYETTE	2809 BUTTERFIELD ROAD OAK BROOK, IL 60523 USA
TREASURER/DIRECTOR	JEFF VITTORIO	2809 BUTTERFIELD ROAD OAK BROOK, IL 60523 USA
DIRECTOR	CHRIS CASE	2809 BUTTERFIELD ROAD OAK BROOK, IL 60523 USA
DIRECTOR	SHANNON ERLER	2809 BUTTERFIELD ROAD OAK BROOK, IL 60523 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

CT CORPORATION SYSTEM 450 VETERANS MEMORIAL PARKWAY, SUITE 7A EAST
PROVIDENCE , RI 02914

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

Signed this 14 Day of May, 2016 at 3:42:43 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 KELLY LETTMANN
Signature of Authorized Person

Form No. 631
Revised 09/07

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