



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. 000056180

2. Name of Corporation DALE COURT CONDOMINIUM ASSOCIATION, INC.

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: P.O. BOX 8971

City or Town: CRANSTON State: RI Zip: 02920 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 MANAGE THE AFFAIRS OF THE CONDOMINIUM ASSOCIATION

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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
PRESIDENT	DANIELLE FORD	39 G DALE AVENUE JOHNSTON, RI 02919 USA
TREASURER	KEVIN SARLI	734 GREENVILLE AVENUE JOHNSTON, RI 02919 USA
SECRETARY	CHERYL BAGAGLIA	27 FACTORY POND CIRCLE

		GREENVILLE, RI 02828 USA
VICE PRESIDENT	KEVIN SARLI	734 GREENVILLE AVENUE JOHNSTON, RI 02919 USA
DIRECTOR	DANIELLE FORD	39 G DALE AVENUE JOHNSTON, RI 02919 USA
DIRECTOR	KEVIN SARLI	734 GREENVILLE AVENUE JOHNSTON, RI 02919 USA
DIRECTOR	CHERYL BAGAGLIA	27 FACTORY POND CIRCLE GREENVILLE, RI 02828 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

PROPERTY MANAGEMENT PROFESSIONALS, INC. 172 STONY ACRE DRIVE CRANSTON , RI 02920

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

Signed this 29 Day of June, 2016 at 4:08:11 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 SHERRY FERREIRACADDEN
Signature of Authorized Person

Form No. 631
Revised 09/07

© 2007 - 2016 State of Rhode Island and Providence Plantations
All Rights Reserved