



**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. 000035543

2. Name of Corporation SUMMIT NEIGHBORHOOD ASS., INC.

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: P.O. BOX 41092

City or Town: PROVIDENCE State: RI Zip: 02940 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

PRESERVATION OF THE RESIDENTIAL CHARACTER OF THE NEIGHBORHOOD.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	DEAN WEINBERG	25 LAURISTON ST PROVIDENCE, RI 02906 USA
TREASURER	BRITT PAGE	177 MORRIS AVE. PROVIDENCE, RI 02906 USA
SECRETARY	THOMAS SCHMELING	70 12TH ST

		PROVIDENCE, RI 02906 USA
VICE PRESIDENT	KERRY KOHRING	95 BAYARD ST PROVIDENCE, RI 02906 USA
DIRECTOR	EMILY SPITZMAN	54 LAURISTON ST PROVIDENCE, RI 02906 USA
DIRECTOR	GRANT DULGARIAN	20 EXETER ST PROVIDENCE, RI 02906 USA
DIRECTOR	DAN MACLELLAN	153 LAFAYETTE ST PAWTUCKET, RI 02860 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**

DEAN WEINBERG 25 LAURISTON STREET PROVIDENCE , RI 02906

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

Signed this 7 Day of December, 2016 at 9:30:07 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 DEAN WEINBERG
Signature of Authorized Person

Form No. 631
Revised 09/07

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