



State of Rhode Island and Providence Plantations  
**Department of State - Business Services Division**

**Annual Report for the year:** 2016  
**Non-Profit Corporation**

- Filing period: June 1 - June 30
- Filing Fee: \$20.00
- Penalty: Additional \$25.00 fee if form is not filed by July 30.

1. Entity ID Number <b>155523</b>		2. Exact name of the Corporation <b>FAIRVIEW COMMONS HOMEOWNERS ASSOCIATION</b>	
3. State of Incorporation <b>RI</b>		4. Brief description of the character of business conducted in Rhode Island <i>Promote Recreation, Health, Safety and welfare of the residents of Fairview Commons and for improvement + maintenance of common areas</i>	
5. Principal Office Address <b>44 Woodmist Circle</b>		City <b>COVENTRY</b>	State <b>RI</b>
		Zip <b>02816</b>	
6. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>			
President Name <b>BRUCE GILMAN</b>		Vice-President Name <b>DAVE PALANA</b>	
Street Address <b>11 Woodmist Circle</b>		Street Address <b>44 Woodmist Circle</b>	
City <b>COVENTRY</b>	State <b>RI</b>	City <b>COVENTRY</b>	State <b>RI</b>
Zip <b>02816</b>		Zip <b>02816</b>	
Secretary Name <b>LORETTA REEVES</b>		Treasurer Name <b>JEAN TOUSSAINT</b>	
Street Address <b>WOODMIST CIRCLE</b>		Street Address <b>43 Woodmist Circle</b>	
City <b>COVENTRY</b>	State <b>RI</b>	City <b>COVENTRY</b>	State <b>RI</b>
Zip <b>02816</b>		Zip <b>02816</b>	
7. List ALL directors (names and addresses). RI Corporations <b>MUST</b> list at least <b>THREE</b> directors. <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>			
Director Name <b>JOHN ABOOD</b>		Director Name <b>BRUCE GILMAN</b>	
Street Address <b>45 Woodmist Circle</b>		Street Address <b>11 Woodmist Circle</b>	
City <b>COVENTRY</b>	State <b>RI</b>	City <b>COVENTRY</b>	State <b>RI</b>
Zip <b>02816</b>		Zip <b>02816</b>	
Director Name <b>DAVE PALANA</b>		Director Name	
Street Address <b>44 Woodmist Circle</b>		Street Address	
City <b>COVENTRY</b>	State <b>RI</b>	City	State
Zip <b>02816</b>		Zip	
8. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641.			
<b>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.</b>			
<i>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.</i>			
Name of Officer/Authorized Representative <b>JEAN TOUSSAINT</b>			Date <b>12/18/16</b>
Signature of Officer/Authorized Representative <i>[Signature]</i>			SIGN DOCUMENT HERE

**FILED**

DEC 27 2016

By 1110  
*[Signature]*

**MAIL TO:**  
 Division of Business Services  
 148 W. River Street, Providence, Rhode Island 02904-2615  
 Phone: (401) 222-3040  
 Website: www.sos.ri.gov