



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:** 2017

**1. Corporate ID No.** 000102113

**2. Name of Corporation** Howe Dock Association, Inc.

**3. State of Incorporation**

State: RI

**4. Corporate Address in Rhode Island**

No. and Street: 301 PROMENADE STREET

City or Town: PROVIDENCE

State: RI Zip: 02908 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 HOLD TITLE TO CERTAIN REAL PROPERTY ON LOW LANE IN BRISTOL, RI.

**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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**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	WILLIAM H. LOW	63 HILLCREST STREET AUBURN, ME 04210 USA
TREASURER	DEWOLF FULTON	28 MONKEYWRENCH LANE BRISTOL, RI 02809 USA
SECRETARY	FRANK STEEL	8780 SW 64TH CT

		MIAMI, FL 33143 USA
DIRECTOR	FRANK STEEL	146 W. SPRINGFIELD AVE PHILADELPHIA, PA 19118 USA
DIRECTOR	WILLIAM H. LOW	63 HILLCREST STREET AUBURN, ME 04210 USA
DIRECTOR	DEWOLF FULTON	28 MONKEYWRENCH LANE BRISTOL, RI 02809 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**

SANDRA MATRONE MACK MACK LAW ASSOCIATES LLC 50 SOUTH MAIN STREET, SUITE 308S  
PROVIDENCE , RI 02903

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

**Signed this 17 Day of February, 2017 at 9:18:41 AM 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 SANDRA MATRONE MACK  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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