



**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. 000027057

2. Name of Corporation JAMESTOWN SHORES ASSOCIATION

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: P.O. BOX 46
City or Town: JAMESTOWN State: RI Zip: 02835 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 CONSERVE AND PROMOTE THE WELFARE OF ITS MEMBERS AND OF JAMESTOWN SHORES

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	ANN M GAGNON	10 CHAMPLIN WAY JAMESTOWN, RI 02835 USA
TREASURER	TIMOTHY YENTSCH	401 GONDOLA JAMESTOWN, RI 02835 USA

SECRETARY	JEANNE GIRARD	7 BARK ST. JAMESTOWN , RI 02835 USA
VICE PRESIDENT	ANITA GIRARD	39 SEASIDE DRIVE JAMESTOWN, RI 02835 USA
DIRECTOR	LAURA YENTSCH	401 GONDOLA AVE JAMESTOWN, RI 02835 USA
DIRECTOR	ANNE M. GAGNON	10 CHAMPLIN WAY JAMESTOWN, RI 02835 USA
DIRECTOR	TIMOTHY J YENTSCH	401 GONDOLA AVE JAMESTOWN, RI 02835 USA
DIRECTOR	JEANNE GIRARD	7 BARK ST. JAMESTOWN, RI 02835 USA
DIRECTOR	ANITA GIRARD	39 SEASIDE DR. JAMESTOWN, RI 02835 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**

ANN GAGNON 10 CHAMPLIN WAY JAMESTOWN , RI 02835

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

Signed this 6 Day of May, 2017 at 11:19:02 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 TIMOTHY J. YENTSCH
Signature of Authorized Person

Form No. 631
Revised 09/07