State of Rhode Island and Providence Plantations Fee: \$20.00 Office of the Secretary of State
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. 000030467
2. Name of Corporation WOOD ESTATES RESIDENTS ASSOCIATION
3. State of Incorporation
State: <u>RI</u>
ARTICLE III
Using the dropdown labeled NAICS Code below, select the classification title that describes the primary type of activity in which your entity engages. The box to the right of the dropdown will populate a NAICS Code based on the chosen selection. If the NAICS Code is known, enter it into the box on the right. For further assistance with selecting a classification <u>click here.</u>
NAICS Code 6
813410
4. Corporate Address in Rhode Island
No. and Street: P.O. BOX 643
City or Town:COVENTRYState: RIZip: 02816Country: 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
SOCIAL, NEIGHBORHOOD PROMOTION, NEIGHBORHOOD 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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
TREASURER	SUSAN C STEPHEN	15 APPLE BLOSSOM LANE COVENTRY, RI 02816 USA
SECRETARY	ROSEMARY CARDOZA	42 WISTERIA DR COVENTRY, RI 02816 USA
DIRECTOR	DEBORAH YOST	36 MAGNOLIA LANE COVENTRY, RI 02816 USA
DIRECTOR	KATHY WEST	114 WOOD COVE DR COVENTRY, RI 02816 USA
PRESIDENT	JOHN WEST	5 CIRCLEWOOD DR COVENTRY, RI 02816 USA
DIRECTOR	LAURIE HEBERT	83 WISTERIA DR. COVENTRY, RI 02816 USA

MARC LAWRENCE <u>5 BLUE SPRUCE DRIVE</u> <u>COVENTRY</u>, <u>RI</u> <u>02816</u>

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

Signed this 4 Day of June, 2017 at 3:10:24 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 <u>SUSAN C.STEPHEN</u> Signature of Authorized Person

Form No. 631 Revised 09/07

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