



**STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS**  
**Office of the Secretary of State - Division of Business Services**

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

# NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR **2017**

Filing Period: June 1 - June 30 • This report must be typed or printed legibly.

Filing Fee: \$20.00 • FAILURE TO FILE THIS REPORT BY JULY 30 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. <b>31213</b>		2. Exact name of the Corporation <b>Sheeps Meadow Association</b>			
3. State of Incorporation <b>Rhode Island</b>		4. Brief description of the character of business conducted in Rhode Island <b>Ownership and management of common land area in colony of seasonal cottages</b>			
5. Principal office address <b>Corn Neck Road</b>		City <b>Block Island</b>		State <b>RI</b>	Zip <b>02807</b>
6. LIST <b>ALL</b> OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name <b>Heidi Holever</b>		Vice-President Name <b>John McDaniel</b>			
Street Address <b>77 Maryanne Drive</b>		Street Address <b>19 Clubhouse Lane</b>			
City <b>Coventry</b>	State <b>CT</b>	Zip <b>06238</b>	City <b>Nesconset</b>	State <b>NY</b>	Zip <b>11767</b>
Secretary Name <b>Kevin Hassey</b>		Treasurer Name <b>Heidi Holever</b>			
Street Address <b>3717 Center Road</b>		Street Address <b>77 Maryanne Drive</b>			
City <b>Cincinnati</b>	State <b>OH</b>	Zip <b>45227</b>	City <b>Coventry</b>	State <b>CT</b>	Zip <b>06238</b>
7. LIST <b>ALL</b> DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS <b>MUST</b> LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name <b>Thomas Devine</b>		Director Name <b>Robert Agricola</b>			
Street Address <b>P.O. Box 645</b>		Street Address <b>P.O. Box 1148</b>			
City <b>Block Island</b>	State <b>RI</b>	Zip <b>02807</b>	City <b>Block Island</b>	State <b>RI</b>	Zip <b>02807</b>
Director Name <b>Carol Appleby-Vanko</b>		Director Name			
Street Address <b>528 Sussex Road</b>		Street Address			
City <b>Towson</b>	State <b>MD</b>	Zip <b>21286</b>	City	State	Zip
8. REGISTERED AGENT IN RHODE ISLAND					
This information is currently of record in the Office of the Secretary of State. Changes require filing Form 641.					

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

File Date \_\_\_\_\_

Check No \_\_\_\_\_

By: \_\_\_\_\_

FOR SECRETARY OF STATE USE ONLY

**FILED**

**JUN 05 2017**

BY 118005

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.

Heidi M. Holever  
Signature of Officer or Authorized Representative

5/31/17  
Date

Heidi Holever  
Print or Type Name of Officer or Authorized Representative