



**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. 000026383

2. Name of Corporation Highridge Swim and Tennis Club

3. State of Incorporation

State: RI

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 [click here](#).

NAICS Code
813990

4. Corporate Address in Rhode Island

No. and Street: 192 OLD RIVER ROAD
City or Town: LINCOLN State: RI Zip: 02865 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

RECREATION FACILITY

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	EFREN HIDALGO	32 RAVENSWOOD AV PROVIDENCE, RI 02096 USA
TREASURER	EDUARDO LESSA	150 ROCKY HILL RD REHOBOTH, MA 02769 USA
SECRETARY	MARCELLE SZURLEY	14 MEMORIAL DRIVE LINCOLN, RI 02865 USA
DIRECTOR	JENNIFER HORNSLETH	148 MOWRY AV CUMBERLAND, RI 02864 USA
DIRECTOR	LAURIE CLARK	285 ELMGROVE AVE PROVIDENCE, RI 02096 USA
DIRECTOR	WENDY RIORDAN	8 HICKORY LN LINCOLN, RI 02865 USA
DIRECTOR	LUANN CORREIA	179 OLD RIVER RD LINCOLN, RI 02865 USA
DIRECTOR	JOYCE BURLINGAME	12 BARBARAS WAY LINCOLN, RI 02865 USA
DIRECTOR	GERRY ROSS	87 MELODY DR ATTLEBORO, MA 02703 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**

EDUARDO LESSA 5 TURNER AVENUE RIVERSIDE , RI 02915

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

Signed this 8 Day of June, 2017 at 11:13:47 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 EDUARDO LESSA
Signature of Authorized Person

Form No. 631
Revised 09/07