



**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.** 000030243

**2. Name of Corporation** POND SHORE ASSOCIATION, INC.

**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: 26 SHADY GLEN DRIVE  
City or Town: EAST GREENWICH State: RI Zip: 02818 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 ACQUIRE, HOLD AND MANAGE RECREATIONAL FACILITIES

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
PRESIDENT	KARIN RIDDLE	POND SHORE DR CHARLESTOWN, RI 02813 USA
TREASURER	CRAIG LAPPEN	POND SHORE DR CHARLESTOWN, RI 02813 USA
SECRETARY	RICHARD J RUGGIERO	POND SHORE DR CHARLESTOWN, RI 02813 USA
VICE PRESIDENT	JEAN L MCCARTHY	POND SHORE DR CHARLESTOWN, RI 02813 USA
DIRECTOR	EVELYN UNGARO	POND SHORE DR CHARLESTOWN, RI 02813 USA
DIRECTOR	THOMAS COSKER	POND SHORE DR CHARLESTOWN, RI 02813 USA
DIRECTOR	OLIVIA NUZZO	POND SHORE DR CHARLESTOWN, RI 02813 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**

CHARLES J. MCCARTHY 26 SHADY GLEN DRIVE EAST GREENWICH , RI 02818

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

**Signed this 13 Day of June, 2017 at 3:22:39 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 CHARLES MCCARTHY  
Signature of Authorized Person

Form No. 631  
Revised 09/07