



State of Rhode Island and Providence Plantations  
**Department of State - Business Services Division**


**Annual Report for the year:** 2017

**Non-Profit Corporation**

→ Filing period: June 1 - June 30

→ Filing Fee: \$20.00

→ Penalty: Additional \$25.00 fee if form is not filed by July 30.

1. Entity ID Number <b>28355</b>		2. Exact name of the Corporation <b>Cedarfield Homeowners' Association, Inc.</b>			
3. State of Incorporation <b>Rhode Island</b>		5. Brief description of the character of business conducted in Rhode Island <b>A group of homeowners organized to maintain common land</b>			
4. NAICS Code <b>813910 - Business Associati</b> <input type="checkbox"/>					
6. Principal Office Address <b>PO Box 221</b>		City <b>North Kingstown</b>		State <b>RI</b>	Zip <b>02852</b>
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name <b>Fred Scholz</b>			Vice-President Name <b>Malcolm Long</b>		
Street Address <b>134 Daniel Drive</b>			Street Address <b>205 Daniel Drive</b>		
City <b>North Kingstown</b>	State <b>RI</b>	Zip <b>02852</b>	City <b>North Kingstown</b>	State <b>RI</b>	Zip <b>02852</b>
Secretary Name <b>Suzanne Stecker</b>			Treasurer Name <b>Suzanne Stecker</b>		
Street Address <b>144 Pine Tree Circle</b>			Street Address <b>144 Pine Tree Circle</b>		
City <b>North Kingstown</b>	State <b>RI</b>	Zip <b>02852</b>	City <b>North Kingstown</b>	State <b>RI</b>	Zip <b>02852</b>
8. List ALL directors (names and addresses). RI Corporations <b>MUST</b> list at least <b>THREE</b> directors. <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name <b>Fred Scholz</b>			Director Name <b>Malcolm Long</b>		
Street Address <b>134 Daniel Drive</b>			Street Address <b>205 Daniel Drive</b>		
City <b>North Kingstown</b>	State <b>RI</b>	Zip <b>02852</b>	City <b>North Kingstown</b>	State <b>RI</b>	Zip <b>02852</b>
Director Name <b>Suzanne Stecker</b>			Director Name		
Street Address <b>144 Pine Tree Circle</b>			Street Address		
City <b>North Kingstown</b>	State <b>RI</b>	Zip <b>02852</b>	City	State	Zip
9. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641.					
<b>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.</b>					
<i>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.</i>					
Name of Officer/Authorized Representative <b>Suzanne Stecker, Secretary/Treasurer</b>				Date <b>June 13, 2017</b>	
Signature of Officer/Authorized Representative 					

**MAIL TO:**  
Division of Business Services  
148 W. River Street, Providence, Rhode Island 02904-2615  
**Phone:** (401) 222-3040  
**Website:** www.sos.ri.gov

**FILED**  
**JUN 19 2017**  
**BY 282220**

FORM 631 - Revised: 06/2017