

Spencer Commons



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 100982		2. Exact name of the Corporation Spencer Commons Condominium Association			
3. State of Incorporation RI		5. Brief description of the character of business conducted in Rhode Island Home Owners Association			
4. NAICS Code 813990 - Other Similar Orga					
6. Principal Office Address 1865 Post Rd Ste 202		City Warwick	State RI	Zip 02886	
7. List ALL officers (names and addresses). RI Corporations MUST list at least THREE officers. Check the box to indicate an attachment <input type="checkbox"/>					
President Name Leo Pelletier			Vice-President Name Charlene Rigali		
Street Address 1588 Main St Unit 11			Street Address 1588 Main St Unit 35		
City West Warwick	State RI	Zip 02893	City West Warwick	State RI	Zip 02893
Secretary Name Roger St Jean			Treasurer Name Steve Pasetti		
Street Address 1588 Main St Unit 15			Street Address 1588 Main St Unit 12		
City West Warwick	State RI	Zip 02893	City West Warwick	State RI	Zip 02893
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment <input type="checkbox"/>					
Director Name Leo Pelletier			Director Name Charlene Rigali		
Street Address 1588 Main St Unit 11			Street Address 1588 Main St Unit 35		
City West Warwick	State RI	Zip 02893	City West Warwick	State RI	Zip 02893
Director Name Roger St Jean			Director Name Steve Pasetti		
Street Address 1588 Main St Unit 15			Street Address 1588 Main St Unit 12		
City West Warwick	State RI	Zip 02893	City West Warwick	State RI	Zip 02893
9. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641.					
<i>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.</i>					
<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 Leo Pelletier/Board President				Date 7/27/17	
Signature of Officer/Authorized Representative <i>Leo Pelletier</i>					

FILED

JUL 27 2017

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