



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 138792		2. Exact name of the Corporation 75 Western Industrial Drive Condominium Association, Inc.			
3. State of Incorporation Rhode Island		5. Brief description of the character of business conducted in Rhode Island To act as the unit owners' association.			
4. NAICS Code 813990 - Other Similar Orga:					
6. Principal Office Address 10 Classic Court		City Cranston	State RI	Zip 02921	
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Dennis M. Luzier			Vice-President Name Lance Cardillo		
Street Address 10 Classic Court			Street Address 6 Windsor Court		
City Cranston	State RI	Zip 02921	City Lincoln	State RI	Zip 02865
Secretary Name Charles Hall			Treasurer Name Elizabeth A. Luzier		
Street Address 215 Promenade Street			Street Address 10 Classic Court		
City Barrington	State RI	Zip 02806	City Cranston	State RI	Zip 02921
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 Dennis M. Luzier			Director Name Lance Cardillo		
Street Address 10 Classic Court			Street Address 6 Windsor Court		
City Cranston	State RI	Zip 02921	City Lincoln	State RI	Zip 02921
Director Name Elizabeth A. Luzier			Director Name Charles Hall		
Street Address 10 Classic Court			Street Address 215 Promenade Street		
City Cranston	State RI	Zip 02921	City Barrington	State RI	Zip 02806
9. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641.					
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>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 Dennis M. Luzier, President				Date 6/7/2017	
Signature of Officer/Authorized Representative 					

MAIL TO:
 Division of Business Services
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 Phone: (401) 222-3040
 Website: www.sos.ri.gov

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