RI SOS Filing Number: 201867087540 Date: 5/25/2018 4:00:00 PM



A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street Providence, RI 02904-2615 401.222.3040

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2018

Filing Period: June 1 - June 30 . Filing Fee: \$20.00" . THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK. * In accordance with R.L.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 fre of \$25.00.								
1. Corporate ID No. 000116835		2. Name of Corporation Boat Cove Dock Association						
3. State of Incorporation R1	1 '	dress in Rhode Island - Street A a Round Road	Address	Charlestown	<i>Σφ</i> RI			
5. Foreign corporation. Brier principal office address			City	State	Ζψ			
The Boat Cove Dock A	Association facilitate		bode Island ate dock utilized by the memb TTACHMENT) FILL IN SPACE Vice President Nama James Dzwil		CHMENTS			
Street Address 117 Amolda Round Road			Snort Address 107 Arnolda Round Road					
city Charlestown	Suate RI	<i>Ζφ</i> 02813	Charlestown	Sake RI	^{Ζφ} 02813			
Secretary Name Andrew Feick			Treasurer Name Kim Hebert					
Street Address 207 Meng Road			Sirce Address 137 Amolda Round Road					
ciny Schwenksville	Siam PA	Ζφ 19473	Ctg. Charlestown	State R1	zφ 02813			
			ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS IND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23 Director Name James Dzwil Street Address 107 Amolda Round Road					
City Charlestown	State Pl	<i>Ζφ</i> 02813	Chy Charlestown	State RI	<i>z</i> _Ψ 02813			
Director Name Andrew Feick			Director Name Kim Hebert					
Smrt Address 207 Meng Road			आप्त Address 137 Arnolda Round Road					
City Schwenksville 9. REGISTERED AGEN			Charlestown	Smr RI	2 <i>tp</i> 02813			
			of State. Changes require filing of					

	11:20	FILED		
	11.0	MAY 2 5 2018		
		331394	Under penalty of perjury, I declare and report, including any accompanying scheme	affirm that I have examined this
File Date		•	statements contained hereif are try and	
Check No.	OS:11 HA 25 YAH 1105		Managlure of Officer LINDA	Lya 11 Date
Ву:	CDRPORATIONS OF SUPPLIES AND SECRETARY OF SUPPLIES AND SU		Print or Type Name of Officer Frenchett	<i>I</i> .
			Title of Officer	Form 631 Rev. 09/17