RI SOS Filing Number: 201868410590 Date: 6/4/2018 11:29:00 AM



# State of Rhode Island and Providence Plantations Office of the Secretary of State

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: 2018

- 1. Corporate ID No. 000118664
- 2. Name of Corporation HARBOUR RIDGE HOMEOWNERS 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

6

Fee: \$20.00

813910

4. Corporate Address in Rhode Island

No. and Street: P.O. BOX 1054

City or Town: NORTH KINGSTOWN State: RI Zip: 02852 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

OPERATING AND MAINTAINING PROPERTY FOR THE USE AND BENEFIT OF RESIDENTS OF THE HARBOUR RIDGE DEVELOPMENT

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete

## THE NUMBER OF DIRECTORS OF A DOMESTIC(RHODE ISLAND)CORPORATION SHALL NOT BE LESS THAN THREE(3). R.I.G.L. 7-6-23

Title	Individual Name	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
TREASURER	A BARRY COLE	97 SUMMIT VIEW LANE
		N KINGSTOWN, RI 02852 USA
SECRETARY	ARLIS REINEKE	43 BREAKWATER LN
		N KINGSTOWN, RI 02852 USA
PRESIDENT	CAROL PLEMMONS	46 BREAKWATER LN
		N KINGSTOWN, RI 02852 US
VICE PRESIDENT	JENNIFER MONAHOGIOS	114 SUMMIT VIEW LN
		N KINGSTOWN, RI 02852 USA
DIRECTOR	JENNIFER MONAHOGIOS	114 SUMMIT VIEW LN
		N KINGSTOWN, RI 02852 USA
DIRECTOR	CAROL PLEMMONS	46 BREAKWATER LN
		N KINGSTOWN, RI 02852 USA
DIRECTOR	A BARRY COLE	97 SUMMIT VIEW LANE
		N KINGSTOWN, RI 02852 USA
DIRECTOR	ARLIS REINEKE	43 BREAKWATER LN
		N KINGSTOWN, RI 02852 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

KEVIN SULLIVAN 32 BREAKWATER LANE NORTH KINGSTOWN, RI 02852

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

Signed this 4 Day of June, 2018 at 11:32:34 AM 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 A. BARRY COLE

Signature of Authorized Person

Form No. 631 Revised 09/07

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