



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

Fee: \$20.00

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.** 000299571

**2. Name of Corporation** BEACH PLUM INN CONDOMINIUM ASSOCIATION

**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

813910

**4. Corporate Address in Rhode Island**

No. and Street: 53 WINNAPAUG ROAD

City or Town: WESTERLY

State: RI

Zip: 02891

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**

PROVIDE FOR THE ADMINISTRATION, OPERATION, MANAGEMENT, MAINTENANCE, PRESERVATION, AND CONTROL OF THE CONDO ASSOCIATION

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**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

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
PRESIDENT	MARIA QUIRKE	360 D WETON WAY THOMASTON, CT 06787 USA
VICE PRESIDENT	ANNA CARNEIRO	48 SPENCER STREET NAUGATUCK, CT 06770 USA
DIRECTOR	ANNA CARNEIRO	48 SPENCER STREET NAUGATUCK, CT 06770 USA
SECRETARY	CARRIE OSAK	30 PALEY FARM ROAD PORTLAND, CT 06480 USA
DIRECTOR	CARRIE OSAK	30 PALEY FARM ROAD PORTLAND, CT 06480 USA
TREASURER	JAMES BROWN	90 MIDDLEFIELD AVENUE WATERBURY, CT 06705 USA
DIRECTOR	JAMES BROWN	90 MIDDLEFIELD AVENUE WATERBURY, CT 06705 USA
DIRECTOR	WILLIAM L COPES	1260 MARION AVENUE CHESHIRE, CT 06410 USA
DIRECTOR	MARIA QUIRKE	360 D WETON WAY THOMASTON, CT 06787 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**

MARTHA DAY 71 MAIN STREET WAKEFIELD , RI 02879

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

**Signed this 13 Day of July, 2018 at 10:37:18 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 MARTHA DAY  
Signature of Authorized Person

Form No. 631  
Revised 09/07