



State of Rhode Island and Providence Plantations  
Department of State - Business Services Division

Annual Report for the year: 2017

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SECRETARY OF STATE  
CORPORATIONS DIV

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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 000120419		2. Exact name of the Corporation The Round Meadows Tenants Association			
3. State of Incorporation RI		5. Brief description of the character of business conducted in Rhode Island TO PROMOTE THE INTERESTS OF AND TO PROTECT THE GENERAL WELFARE OF ITS MEMBERS WITH REGARD TO THE OPERATION OF THE ROUND MEADOWS CAMPGROUND IN LITTLE COMPTON, RI TITLE 7-6			
4. NAICS Code 813319 - Other Social Advocacy					
6. Principal Office Address 636 Daggett Ave		City Pawtucket		State RI	Zip 02861
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name Ronald E. Maigret			Vice-President Name Jack Strachan III		
Street Address 636 Daggett Ave			Street Address 144 Harvard ST		
City Pawtucket	State RI	Zip 02861	City N Attleborough	State MA 02760	Zip
Secretary Name Bobby Legg			Treasurer Name Margaret Grivers		
Street Address 309 Mt Hope St			Street Address Hidden Valley LN		
City N Attleborough	State MA	Zip 02760	City Lincoln	State RI	Zip 02865
8. List ALL directors (names and addresses). RI Corporations <b>MUST</b> list at least <b>THREE</b> directors. <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name ANDREW MALGIERI			Director Name Rob Roy		
Street Address 26 UNION PLACE			Street Address 1315 South Street		
City Boston	State MA	Zip 02118	City Bridgewater	State MA	Zip 02324
Director Name AUTHUR TOMELSON			Director Name George Anter		
Street Address 193 ELLIS ROAD			Street Address 154 Bear Hill Rd Unit 1503		
City N Attleborough	State MA	Zip 02760	City Cumberland	State RI	Zip 02864
9. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641.					
<b>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.</b>					
<small>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.</small>					
Name of Officer/Authorized Representative Ronald E. Maigret					Date July 23, 2018
Signature of Officer/Authorized Representative 					

MAIL TO:  
Division of Business Services  
148 W. River Street, Providence, Rhode Island 02904-2615  
Phone: (401) 222-3040  
Website: www.sos.ri.gov

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