RI SOS Filing Number: 201873745540 Date: 8/2/2018 10:30:00 AM

Denise

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.

[redacted]

RECEIVED
2018 AUG -2 AM 10: 29
SECRETARY OF STATE
CORPORATIONS DIV

1. Entity ID Number	2. Exact name of the Corporation
41494	**Calart Tower Condominium Association, Inc.**
3. State of Incorporation: **RI**	5. Brief description of the character of business conducted in Rhode Island: **Mangement of the common areas of Calart Tower Condominium**
4. NAICS Code: **813920 - Professional Organ**	

6. Principal Office Address	City	State	Zip
400 Reservoir Avenue	**Providence**	**RI**	**02907**

7. List ALL officers (names and addresses) — Check the box to indicate an attachment ☐

President Name **Bruce H. Adler**			Vice-President Name [redacted] BRUCE H ADLER		
Street Address **400 Reservoir Avenue**			Street Address **400 Reservoir Avenue**		
City **Providence**	State **RI**	Zip **02907**	City **Providence**	State **RI**	Zip **02907**
Secretary Name [redacted] EDWARD R. LEMIRE			Treasurer Name [redacted] BRUCE H ADLER		
Street Address **400 Reservoir Avenue**			Street Address **400 Reservoir Avenue**		
City **Providence**	State **ri**	Zip **02907**	City **Providence**	State **RI**	Zip **02907**

8. List ALL directors (names and addresses). RI Corporations **MUST** list at least **THREE** directors. EDWARD R LEMIRE — Check the box to indicate an attachment ☐

Director Name [redacted]			Director Name **Arnold M. Montaquila**		
Street Address **400 Reservoir Avenue**			Street Address **400 Reservoir Avenue**		
City **Providence**	State **RI**	Zip **02907**	City **Providence**	State **RI**	Zip **02907**
Director Name [redacted]			Director Name JOHN KULISEK		
Street Address **400 Reservoir Avenue**			Street Address 400 RESERVOIR		
City **Providence**	State **RI**	Zip **02907**	City PROVIDENCE	State RI	Zip 02907

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.

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

Name of Officer/Authorized Representative	Date
BRUCE H. ADLER	5-10-18

Signature of Officer/Authorized Representative: SIGN DOCUMENT HERE — Bruce H Adler

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

10:30 **FILED**
AUG - 2 2018
BY 336147

FORM 631 - Revised: 11/2017