



NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

Filing Period: June 1 - June 30 • Filing Fee: \$20.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1 Corporate ID No 29122		2 Name of Corporation PASCOAG LAKE SHORES IMPROVEMENT ASSOCIATION	
3 State of Incorporation RHODE ISLAND		4 Corporate address in Rhode Island - Street Address 60 Salisbury Road	
		City Chepachet	Zip 02814
5 Foreign corporation. Enter principal office address		City	State
6 Brief Description of the character of the affairs which are actually conducted in Rhode Island IMPROVEMENT OF HEALTH, SAFETY AND RECREATION OF MEMBERS OF THE ORGANIZATION			
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name Beverly GOULET		Vice President Name ROBIN COTE	
Street Address P.O. Box 239 362 LAKE DRIVE		Street Address P.O. Box 326 55 KEARNS ROAD	
City CHEPACHET	State RI	City CHEPACHET	State RI
Zip 02814		Zip 02814	
Secretary Name PETRA KUPPERS		Treasurer Name JANET L. CARDARELLI	
Street Address 60 SALISBURY RD		Street Address P.O. BOX 765 53 SECOND STREET	
City CHEPACHET	State RI	City CHEPACHET	State RI
Zip 02814		Zip 02814	
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23			
Director Name Beverly Goulet		Director Name Robin cote	
Street Address P.O. Box 239 362 Lake Drive		Street Address P.O. Box 326, 55 Kearns Road	
City Chepachet	State RI	City Chepachet	State RI
Zip 02814		Zip 02814	
Director Name Petra Kupperts		Director Name Janet L. Cardarelli	
Street Address 60 Salisbury Rd.		Street Address P.O. Box 765, 53 Second St.	
City Chepachet	State RI	City Chepachet	State RI
Zip 02814		Zip 02814	
9. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78			
Agent Name PETRA KUPPERS		Address	
Address 60 SALISBURY ROAD		City CHEPACHET	Zip 02814

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



29122

Filing Date 8/24/05
Check No. 1663
By: DA
FOR SECRETARY OF STATE USE ONLY

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.

Beverly A Goulet 8/20/05
Signature of Officer Date
Beverly A Goulet
Print or Type Name of Officer
PRESIDENT
Title of Officer



NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

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FORM MUST BE TYPED OR PRINTED IN BLACK

1. Corporate ID No. 29122	2. Name of Corporation PASCOAG LAKE SHORES ASSOCIATION		
3. State of Incorporation RI	4. Corporate address in Rhode Island - Street Address 60 SALISBURY RD	City CHEPACHET	Zip 02814
5. Foreign corporation. Enter principal office address		City	State Zip

6. Brief Description of the character of the affairs which are actually conducted in Rhode Island.
IMPROVEMENT OF HEALTH, SAFETY AND RECREATION OF MEMBERS OF THIS ORGANIZATION

7. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name BEVERLY GOULET			Vice President Name ROBIN COTE		
Street Address P.O. Box 239 362 LAKE DRIVE			Street Address P.O. Box 926 55 KEARNS ROAD		
City CHEPACHET	State RI	Zip 02814	City CHEPACHET	State RI	Zip 02814
Secretary Name PETRA KUPPERS			Treasurer Name JANET CARDARELLI		
Street Address 60 SALISBURY RD			Street Address P.O. Box 765 53 SECOND STREET		
City CHEPACHET	State RI	Zip 02814	City CHEPACHET	State RI	Zip 02814

8. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN THE SPACES BEFORE USING ATTACHMENTS
THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23

Director Name BEVERLY GOULET			Director Name ROBIN COTE		
Street Address see above			Street Address see above		
City	State	Zip	City	State	Zip
Director Name PETRA KUPPERS			Director Name JANET CARDARELLI		
Street Address see above			Street Address see above		
City	State	Zip	City	State	Zip

9. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 641 - R.I.G.L. 7-6-13/7-6-78

Agent Name PETRA KUPPERS	Address	
Address 60 SALISBURY RD	City CHEPACHET	Zip 02814

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

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.

FILED

File Date: AUG 24 2004

Check No. 60

By: PMK 2696

FOR SECRETARY OF STATE USE ONLY COM

P. M. K. 7/30/2004
Signature of Officer Date

PETRA KUPPERS
Print or Type Name of Officer

SECRETARY
Title of Officer



NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003

Filing Period: June 1 - June 30 • Filing Fee: \$20.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

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IMPROVEMENT OF HEALTH, SAFETY AND RECREATION OF MEMBERS OF THIS ORGANIZATION

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President Name BEVERLY GOULET			Vice President Name ROBIN COTE		
Street Address P.O. Box 239 362 LAKE DRIVE			Street Address P.O. Box 926 55 KEARNS ROAD		
City CHEPACHET	State RI	Zip 02814	City CHEPACHET	State RI	Zip 02814
Secretary Name PETRA KUPPERS			Treasurer Name JANET CARDARELLI		
Street Address 60 SALISBURY RD			Street Address P.O. Box 765 53 SECOND STREET		
City CHEPACHET	State RI	Zip 02814	City CHEPACHET	State RI	Zip 02814

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

Director Name BEVERLY GOULET			Director Name ROBIN COTE		
Street Address See above			Street Address See above		
City	State	Zip	City	State	Zip
Director Name PETRA KUPPERS			Director Name JANET CARDARELLI		
Street Address See above			Street Address See above		
City	State	Zip	City	State	Zip

9. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 641 - R.I.G.L. 7-6-13/7-6-78

Agent Name PETRA KUPPERS	Address	
Address 60 SALISBURY RD	City CHEPACHET	Zip 02814

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

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.

Petra Kuppers 7/30/04
Signature of Officer Date
PETRA KUPPERS
Print or Type Name of Officer
SECRETARY
Title of Officer

FILED

File Date
AUG 24 2004
Check No.
By
FOR SECRETARY OF STATE USE ONLY

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002

Filing Period: June 1 - June 30 • Filing Fee: \$20.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 29122	2. Name of Corporation PASCOAG LAKE SHORES ASSOCIATION		
3. State of Incorporation RI	4. Corporate address in Rhode Island - Street Address 60 SALISBURY RD	City CHEPACHET	Zip 02814
5. Foreign corporation. Enter principal office address		City	State Zip

6. Brief Description of the character of the affairs which are actually conducted in Rhode Island.
IMPROVEMENT OF HEALTH, SAFETY AND RECREATION OF MEMBERS OF THIS ORGANIZATION

7. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) **FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name BEVERLY GOULET			Vice President Name ROBIN COTE		
Street Address P.O. Box 239 362 LAKE DRIVE			Street Address P.O. Box 926 55 KEARNS ROAD		
City CHEPACHET	State RI	Zip 02814	City CHEPACHET	State RI	Zip 02814
Secretary Name PETRA KUPPERS			Treasurer Name JANET CARDARELLI		
Street Address 60 SALISBURY RD			Street Address P.O. Box 765 53 SECOND STREET		
City CHEPACHET	State RI	Zip 02814	City CHEPACHET	State RI	Zip 02814

8. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) **FILL IN THE SPACES BEFORE USING ATTACHMENTS**
THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23

Director Name BEVERLY GOULET			Director Name ROBIN COTE		
Street Address see above			Street Address see above		
City	State	Zip	City	State	Zip
Director Name PETRA KUPPERS			Director Name JANET CARDARELLI		
Street Address see above			Street Address see above		
City	State	Zip	City	State	Zip

9. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78

Agent Name PETRA KUPPERS	Address	
Address 60 SALISBURY RD	City CHEPACHET	Zip 02814

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

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.

File Date **FILED**
Check No. **AUG 24 2004**
By **By M42696**
FOR SECRETARY OF STATE USE ONLY **COM**

Signature of Officer Petra Kuppers Date 7/30/2004
Print or Type Name of Officer PETRA KUPPERS
Title of Officer SECRETARY

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001

Filing Period: June 1 - June 30 • Filing Fee: \$20.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 29122	2. Name of Corporation PASCOAG LAKE SHORES ASSOCIATION		
3. State of Incorporation RI	4. Corporate address in Rhode Island - Street Address 60 SALISBURY RD	City CHEPACHET	Zip 02814
5. Foreign corporation. Enter principal office address		City	State Zip

6. Brief Description of the character of the affairs which are actually conducted in Rhode Island.

IMPROVEMENT OF HEALTH, SAFETY AND RECREATION OF MEMBERS OF THIS ORGANIZATION

7. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name BEVERLY GOULET			Vice President Name ROBIN COTE		
Street Address P.O. Box 239 362 LAKE DRIVE			Street Address P.O. Box 926 55 KEARNS ROAD		
City CHEPACHET	State RI	Zip 02814	City CHEPACHET	State RI	Zip 02814
Secretary Name PETRA KUPPERS			Treasurer Name JANET CARDARELLI		
Street Address 60 SALISBURY RD			Street Address P.O. Box 765 53 SECOND STREET		
City CHEPACHET	State RI	Zip 02814	City CHEPACHET	State RI	Zip 02814

8. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN THE SPACES BEFORE USING ATTACHMENTS
THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23.

Director Name BEVERLY GOULET			Director Name ROBIN COTE		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name PETRA KUPPERS			Director Name JANET CARDARELLI		
Street Address			Street Address		
City	State	Zip	City	State	Zip

9. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 641 - R.I.G.L. 7-6-13/7-6-78

Agent Name PETRA KUPPERS	Address	
Address 60 SALISBURY RD	City CHEPACHET	Zip 02814

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

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.

Petra Kupperts 7/30/2004
Signature of Officer Date

PETRA KUPPERS
Print or Type Name of Officer

SECRETARY
Title of Officer

FILED
File Date
AUG 24 2004
Check No.
By
FOR SECRETARY OF STATE USE ONLY



NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000

Filing Period: June 1 - June 30 • Filing Fee: \$20.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. <u>29122</u>		2. Name of Corporation <u>PASCOAG LAKE SHORES ASSOCIATION</u>			
3. State of Incorporation <u>RI</u>		4. Corporate address in Rhode Island - Street Address <u>60 SALISBURY RD</u>		City <u>CHEPACHET</u>	Zip <u>02814</u>
5. Foreign corporation. Enter principal office address				City	State
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island. <u>IMPROVEMENT OF HEALTH, SAFETY AND RECREATION OF MEMBERS OF THIS ORGANIZATION</u>					
7. NAMES AND ADDRESSES OF THE OFFICERS (X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name <u>BEVERLY GOULET</u>			Vice President Name <u>ROBIN COTE</u>		
Street Address <u>P.O. Box 239 362 LAKE DRIVE</u>			Street Address <u>P.O. Box 926 SS KEARNS ROAD</u>		
City <u>CHEPACHET</u>	State <u>RI</u>	Zip <u>02814</u>	City <u>CHEPACHET</u>	State <u>RI</u>	Zip <u>02814</u>
Secretary Name <u>PETRA KUPPERS</u>			Treasurer Name <u>JANET CARDARELLI</u>		
Street Address <u>60 SALISBURY RD</u>			Street Address <u>P.O. Box 765 53 SECOND STREET</u>		
City <u>CHEPACHET</u>	State <u>RI</u>	Zip <u>02814</u>	City <u>CHEPACHET</u>	State <u>RI</u>	Zip <u>02814</u>
8. NAMES AND ADDRESSES OF THE DIRECTORS (X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN THE SPACES BEFORE USING ATTACHMENTS					
THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23					
Director Name <u>BEVERLY GOULET</u>			Director Name <u>ROBIN COTE</u>		
Street Address <u>see above</u>			Street Address <u>see above</u>		
City	State	Zip	City	State	Zip
Director Name <u>PETRA KUPPERS</u>			Director Name <u>JANET CARDARELLI</u>		
Street Address <u>see above</u>			Street Address <u>see above</u>		
City	State	Zip	City	State	Zip
9. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78					
Agent Name <u>PETRA KUPPERS</u>			Address		
Address <u>60 SALISBURY RD</u>			City <u>CHEPACHET</u>	Zip <u>02814</u>	

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

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.

File Date **FILED**
AUG 24 2004
Check No
By By Ind 069k
FOR SECRETARY OF STATE USE ONLY CMD

Petra Kuppers 7/30/2004
Signature of Officer Date
PETRA KUPPERS
Print or Type Name of Officer
SECRETARY
Title of Officer



NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1999

Filing Period: June 1 - June 30 • Filing Fee: \$20.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 29122		2. Name of Corporation PASCOAG LAKE SHORES ASSOCIATION	
3. State of Incorporation RI	4. Corporate address in Rhode Island - Street Address 60 SALISBURY RD		City CHEPACHET
5. Foreign corporation. Enter principal office address		City	State RI
			Zip 02814

6. Brief Description of the character of the affairs which are actually conducted in Rhode Island.
IMPROVEMENT OF HEALTH, SAFETY AND RECREATION OF MEMBERS OF THIS ORGANIZATION

7. NAMES AND ADDRESSES OF THE OFFICERS **BOX FOR ATTACHMENT** **FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name BEVERLY GOULET			Vice President Name ROBIN COTE		
Street Address P.O. Box 239 362 LAKE DRIVE			Street Address P.O. Box 926 55 KEARNS ROAD		
City CHEPACHET	State RI	Zip 02814	City CHEPACHET	State RI	Zip 02814
Secretary Name PETRA KUPPERS			Treasurer Name JANET CARDARELLI		
Street Address 60 SALISBURY RD			Street Address P.O. Box 765 53 SECOND STREET		
City CHEPACHET	State RI	Zip 02814	City CHEPACHET	State RI	Zip 02814

8. NAMES AND ADDRESSES OF THE DIRECTORS **BOX FOR ATTACHMENT** **FILL IN THE SPACES BEFORE USING ATTACHMENTS**
THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23

Director Name BEVERLY GOULET			Director Name ROBIN COTE		
Street Address see above			Street Address see above		
City	State	Zip	City	State	Zip
Director Name PETRA KUPPERS			Director Name JANET CARDARELLI		
Street Address see above			Street Address see above		
City	State	Zip	City	State	Zip

9. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 641 - R.I.G.L. 7-6-13/7-6-78

Agent Name PETRA KUPPERS		Address	
Address 60 SALISBURY RD		City CHEPACHET	Zip 02814

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

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.

FILED

File Date **AUG 24 2004**

Check No. **By M. A. Brown**

By **CAW**

FOR SECRETARY OF STATE USE ONLY

Signature of Officer **Petra Kuppers** Date **7/30/2004**

Print or Type Name of Officer **PETRA KUPPERS**

Title of Officer **SECRETARY**



NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1998

Filing Period: June 1 - June 30 • Filing Fee: \$20.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 29122	2. Name of Corporation PASCOAG LAKE SHORES ASSOCIATION		
3. State of Incorporation RI	4. Corporate address in Rhode Island - Street Address 60 SALISBURY RD	City CHEPACHET	Zip 02814
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7. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) **FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name BEVERLY GOULET			Vice President Name ROBIN COTE		
Street Address P.O. Box 239 362 LAKE DRIVE			Street Address P.O. Box 926 SS KEARNS ROAD		
City CHEPACHET	State RI	Zip 02814	City CHEPACHET	State RI	Zip 02814
Secretary Name PETRA KUPPERS			Treasurer Name JANET CARDARELLI		
Street Address 60 SALISBURY RD			Street Address P.O. Box 765 53 SECOND STREET		
City CHEPACHET	State RI	Zip 02814	City CHEPACHET	State RI	Zip 02814

8. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) **FILL IN THE SPACES BEFORE USING ATTACHMENTS**
THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23

Director Name BEVERLY GOULET			Director Name ROBIN COTE		
Street Address see above			Street Address see above		
City	State	Zip	City	State	Zip
Director Name PETRA KUPPERS			Director Name JANET CARDARELLI		
Street Address see above			Street Address see above		
City	State	Zip	City	State	Zip

9. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 641 - R.I.G.L. 7-6-13/7-6-78

Agent Name PETRA KUPPERS	Address	
Address 60 SALISBURY RD	City CHEPACHET	Zip 02814

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

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.

10. [Stamp] 11
 Signature of Officer: Petra Kuppers Date: 7/30/2004
 Print or Type Name of Officer: PETRA KUPPERS
 Title of Officer: SECRETARY

FILED
 File Date: AUG 24 2004
 Check No. By [Signature]
 FOR SECRETARY OF STATE USE ONLY [Signature]



NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1957

Filing Period: June 1 - June 30 • Filing Fee: \$20.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

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3. State of Incorporation RI		4. Corporate address in Rhode Island - Street Address 60 SALISBURY RD		City CHEPACHET	Zip 02814
5. Foreign corporation. Enter principal office address				City	State
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island. IMPROVEMENT OF HEALTH, SAFETY AND RECREATION OF MEMBERS OF THIS ORGANIZATION					
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President Name BEVERLY GOULET			Vice President Name ROBIN COTE		
Street Address P.O. Box 239 362 LAKE DRIVE			Street Address P.O. Box 926 SS KEARNS ROAD		
City CHEPACHET	State RI	Zip 02814	City CHEPACHET	State RI	Zip 02814
Secretary Name PETRA KUPPERS			Treasurer Name JANET CARDARELLI		
Street Address 60 SALISBURY RD			Street Address P.O. Box 765 53 SECOND STREET		
City CHEPACHET	State RI	Zip 02814	City CHEPACHET	State RI	Zip 02814
8. NAMES AND ADDRESSES OF THE DIRECTORS (EX. BOX FOR ATTACHMENT) FILL IN THE SPACES BEFORE USING ATTACHMENTS THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3) R.I.G.L. 7-6-23					
Director Name BEVERLY GOULET			Director Name ROBIN COTE		
Street Address see above			Street Address see above		
City	State	Zip	City	State	Zip
Director Name PETRA KUPPERS			Director Name JANET CARDARELLI		
Street Address see above			Street Address see above		
City	State	Zip	City	State	Zip
9. REGISTERED AGENT IN RHODE ISLAND DO NOT ALTER Changes require filing of Form 641 R.I.G.L. 7-6-13/7-6-78					
Agent Name PETRA KUPPERS			Address		
Address 60 SALISBURY RD			City CHEPACHET	Zip 02814	

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

FILED

File Date AUG 24 2004
 Check No. By Mkt 1096
 By CAA
 FOR SECRETARY OF STATE USE ONLY

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.

Petra Kuppers 7/30/2004
 Signature of Officer Date
PETRA KUPPERS
 Print or Type Name of Officer
SECRETARY
 Title of Officer



NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1996

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(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 29122		2. Name of Corporation PASCOAG LAKE SHORES ASSOCIATION	
3. State of Incorporation RI	4. Corporate address in Rhode Island - Street Address 60 SALISBURY RD		City CHEPACHET Zip 02814
5. Foreign corporation. Enter principal office address		City	State Zip

6. Brief Description of the character of the affairs which are actually conducted in Rhode Island.
IMPROVEMENT OF HEALTH, SAFETY AND RECREATION OF MEMBERS OF THIS ORGANIZATION

7. NAMES AND ADDRESSES OF THE OFFICERS (X) BOX FOR ATTACHMENT () FILL IN SPACES BEFORE USING ATTACHMENTS

President Name BEVERLY GOULET			Vice President Name ROBIN COTE		
Street Address P.O. Box 239 362 LAKE DRIVE			Street Address P.O. Box 926 55 KEARNS ROAD		
City CHEPACHET	State RI	Zip 02814	City CHEPACHET	State RI	Zip 02814
Secretary Name PETRA KUPPERS			Treasurer Name JANET CARDARELLI		
Street Address 60 SALISBURY RD			Street Address P.O. Box 765 53 SECOND STREET		
City CHEPACHET	State RI	Zip 02814	City CHEPACHET	State RI	Zip 02814

8. NAMES AND ADDRESSES OF THE DIRECTORS (X) BOX FOR ATTACHMENT () FILL IN THE SPACES BEFORE USING ATTACHMENTS
THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3) R.I.G.L. 7-6-23

Director Name BEVERLY GOULET			Director Name ROBIN COTE		
Street Address See above			Street Address See above		
City	State	Zip	City	State	Zip
Director Name PETRA KUPPERS			Director Name JANET CARDARELLI		
Street Address See above			Street Address See above		
City	State	Zip	City	State	Zip

9. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 641 - R.I.G.L. 7-6-13/7-6-78

Agent Name PETRA KUPPERS		Address	
Address 60 SALISBURY RD		City CHEPACHET	Zip 02814

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

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.

Petra Kuppers
Signature of Officer
7/30/2004
Date
PETRA KUPPERS
Print or Type Name of Officer
SECRETARY
Title of Officer

FILED

File Date
AUG 24 2004

Check No.

By
M 42696

FOR SECRETARY OF STATE USE ONLY



NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1995

Filing Period: June 1 - June 30 • Filing Fee: \$20.00
(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 29122	2. Name of Corporation PASCOAG LAKE SHORES ASSOCIATION		
3. State of Incorporation RI	4. Corporate address in Rhode Island - Street Address 60 SALISBURY RD	City CHEPACHET	Zip 02814
5. Foreign corporation. Enter principal office address		City	State Zip

6. Brief Description of the character of the affairs which are actually conducted in Rhode Island.
IMPROVEMENT OF HEALTH, SAFETY AND RECREATION OF MEMBERS OF THIS ORGANIZATION

7. NAMES AND ADDRESSES OF THE OFFICERS (X) BOX FOR ATTACHMENT () FILL IN SPACES BEFORE USING ATTACHMENTS

President Name BEVERLY GOULET			Vice President Name ROBIN COTE		
Street Address P.O. Box 239 362 LAKE DRIVE			Street Address P.O. Box 926 55 KEARNS ROAD		
City CHEPACHET	State RI	Zip 02814	City CHEPACHET	State RI	Zip 02814
Secretary Name PETRA KUPPERS			Treasurer Name JANET CARDARELLI		
Street Address 60 SALISBURY RD			Street Address P.O. Box 765 53 SECOND STREET		
City CHEPACHET	State RI	Zip 02814	City CHEPACHET	State RI	Zip 02814

8. NAMES AND ADDRESSES OF THE DIRECTORS (X) BOX FOR ATTACHMENT () FILL IN THE SPACES BEFORE USING ATTACHMENTS
*THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3) (R.I.G.L. 7-6-23)

Director Name BEVERLY GOULET			Director Name ROBIN COTE		
Street Address see above			Street Address see above		
City	State	Zip	City	State	Zip
Director Name PETRA KUPPERS			Director Name JANET CARDARELLI		
Street Address see above			Street Address see above		
City	State	Zip	City	State	Zip

9. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 641 - R.I.G.L. 7-6-13/7-6-78

Agent Name PETRA KUPPERS	Address	
Address 60 SALISBURY RD	City CHEPACHET	Zip 02814

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

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.

Petra Kupers 7/30/2004
Signature of Officer Date
PETRA KUPPERS
Print or Type Name of Officer
SECRETARY
Title of Officer

FILED
File Date AUG 24 2004
Check No. By M 4 2096
By [Signature]
FOR SECRETARY OF STATE USE ONLY



NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1994

Filing Period: June 1 - June 30 • Filing Fee: \$20.00
(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 29122	2. Name of Corporation PASCOAG LAKE SHORES ASSOCIATION		
3. State of Incorporation RI	4. Corporate address in Rhode Island - Street Address 60 SALISBURY RD	City CHEPACHET	Zip 02814
5. Foreign corporation. Enter principal office address		City	State Zip

6. Brief Description of the character of the affairs which are actually conducted in Rhode Island.
IMPROVEMENT OF HEALTH, SAFETY AND RECREATION OF MEMBERS OF THIS ORGANIZATION

7. NAMES AND ADDRESSES OF THE OFFICERS (XX BOX FOR ATTACHMENT) [] FILL IN SPACES BEFORE USING ATTACHMENTS

President Name BEVERLY GOULET			Vice President Name ROBIN COTE		
Street Address P.O. Box 239 362 LAKE DRIVE			Street Address P.O. Box 926 55 KEARNS ROAD		
City CHEPACHET	State RI	Zip 02814	City CHEPACHET	State RI	Zip 02814
Secretary Name PETRA KUPPERS			Treasurer Name JANET CARDARELLI		
Street Address 60 SALISBURY RD			Street Address P.O. Box 765 53 SECOND STREET		
City CHEPACHET	State RI	Zip 02814	City CHEPACHET	State RI	Zip 02814

8. NAMES AND ADDRESSES OF THE DIRECTORS (XX BOX FOR ATTACHMENT) [] FILL IN THE SPACES BEFORE USING ATTACHMENTS
THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3) R.I.G.L. 7-6-23

Director Name BEVERLY GOULET			Director Name ROBIN COTE		
Street Address see above			Street Address see above		
City	State	Zip	City	State	Zip
Director Name PETRA KUPPERS			Director Name JANET CARDARELLI		
Street Address see above			Street Address see above		
City	State	Zip	City	State	Zip

9. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 641 - R.I.G.L. 7-6-13/7-6-78

Agent Name PETRA KUPPERS	Address	
Address 60 SALISBURY RD	City CHEPACHET	Zip 02814

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

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.

Petra Kuppers 7/30/2004
Signature of Officer Date
PETRA KUPPERS
Print or Type Name of Officer
SECRETARY
Title of Officer

FILED
File Date AUG 24 2004
Check No. By M. St. 1096
By [Signature]
FOR SECRETARY OF STATE USE ONLY

Filing Fee: \$20.00

To be filed annually during the month of June

State of Rhode Island and Providence Plantations

NON-PROFIT CORPORATION

Corporate ID Number 29122 ~~22-2642260~~ Annual Report for the year 1993

FIRST: The name of the corporation is PASCOAG LAKE SHORES IMPROVEMENT ASSOCIATION

SECOND: It is incorporated under the laws of THE STATE OF RHODE ISLAND

THIRD: The character of the affairs which it is actually conducting in Rhode Island, briefly stated, is THE IMPROVEMENT OF HEALTH, SAFETY AND RECREATION OF MEMBERS OF THIS ORGANIZATION

FOURTH: If a foreign corporation, the address of its principal office in the state or country under the laws of which it is incorporated is

FIFTH: Corporate address in Rhode Island P.O. Box 239, CHEPACHET, RI 02814
362 LAKE DRIVE CHEPACHET RI 02814

SIXTH: Names and addresses of its directors and officers:

(Addresses must include street, number if any, and zip code)

NAME	OFFICE	ADDRESS
.....	Director	.....
.....	Director	.....
.....	Director	.....
.....	President	.....
JAMES BYKLEY	Vice President	2058 ELMWOOD AVE WARWICK, RI 02888
DEBRA M FERREIRA	Secretary	36 SAUSBURY RD CHEPACHET, RI 02814
BEVERLY GOULET	Treasurer	362 LAKE DR CHEPACHET, RI 02814

Dated: April 9 19 94

PASCOAG LAKE SHORES IMPROVEMENT ASSOCIATION
(Name of Corporation)

By Debra M Ferreira

Title Secretary

(Report must be signed by an officer)

If the corporation has changed its registered office and/or its registered agent, Form N-14 must be filed. Please contact Corporation Division for information, 277-3040
Mail with fee to: Corporations Division, 100 North Main Street, Providence, RI 02903.

FILED
APR 15 1994
BY ME59121739

Filing Fee: \$20.00

To be filed annually during the month of June

State of Rhode Island and Providence Plantations

NON-PROFIT CORPORATION

Corporate ID Number 29122 ~~27-2642260~~ Annual Report for the year 1992

FIRST: The name of the corporation is PASCOAG LAKE SHORES IMPROVEMENT ASSOCIATION

SECOND: It is incorporated under the laws of THE STATE OF RHODE ISLAND

THIRD: The character of the affairs which it is actually conducting in Rhode Island, briefly stated, is THE IMPROVEMENT OF HEALTH, SAFETY AND RECREATION OF MEMBERS OF THE ORGANIZATION

FOURTH: If a foreign corporation, the address of its principal office in the state or country under the laws of which it is incorporated is

FIFTH: Corporate address in Rhode Island P.O. Box 239 CHEPACHET, RI 02814 362 LAKE DRIVE CHEPACHET RI 02814

SIXTH: Names and addresses of its directors and officers:

(Addresses must include street, number if any, and zip code)

Table with 3 columns: NAME, OFFICE, ADDRESS. Rows include David Charron (President), David Therberge (Vice President), Debra Charron (Secretary), and Ron Leuth (Treasurer).

Dated: April 9 19 94 PASCOAG LAKE SHORES IMPROVEMENT ASSOCIATION (Name of Corporation)

FILED APR 15 1994 BY ME 59121739

By Debra M Pereira Title 1993-94 Secretary (Report must be signed by an officer)

If the corporation has changed its registered office and/or its registered agent, Form N-14 must be filed. Please contact Corporation Division for information, 277-3040 Mail with fee to: Corporations Division, 100 North Main Street, Providence, RI 02903.

Filing Fee: \$20.00

To be filed annually during the month of June

State of Rhode Island and Providence Plantations

NON-PROFIT CORPORATION

29122

Corporate ID Number ~~22-2642260~~

Annual Report for the year 1991

FIRST: The name of the corporation is PISCAGO LAKE SHORES IMPROVEMENT ASSOCIATION

SECOND: It is incorporated under the laws of THE STATE OF RHODE ISLAND

THIRD: The character of the affairs which it is actually conducting in Rhode Island, briefly stated, is THE IMPROVEMENT OF HEALTH, SAFETY AND RECREATION OF MEMBERS OF THIS ORGANIZATION

FOURTH: If a foreign corporation, the address of its principal office in the state or country under the laws of which it is incorporated is

FIFTH: Corporate address in Rhode Island P.O. Box 239 CHEPACHET RI 02814
362 LAKE DRIVE CHEPACHET RI 02814

SIXTH: Names and addresses of its directors and officers:

(Addresses must include street, number if any, and zip code)

NAME	OFFICE	ADDRESS
.....	Director	.....
.....	Director	.....
.....	Director	.....
DAVID CHARRON	President	386 LAKE DR CHEPACHET RI 02814
DAVID THERBERGE	Vice President	FIRST ROAD CHEPACHET RI 02814
DEBRA CHARRON	Secretary	386 LAKE DR CHEPACHET RI 02814
RON LUETH	Treasurer	237 LAKE DR CHEPACHET RI 02814

(If additional space is needed, attach rider)

Dated: April 9 1994

PISCAGO LAKE SHORES IMPROVEMENT ASSOCIATION
(Name of Corporation)

By João M. Pereira

Title Secretary

(Report must be signed by an officer)

FILED
APR 15 1994
By ME 59121739

If the corporation has changed its registered office and/or its registered agent, Form N-14 must be filed. Please contact Corporation Division for information, 277-3040
Mail with fee to: Corporations Division, 100 North Main Street, Providence, RI 02903.

Filing Fee: \$20.00

To be filed annually during the month of June

State of Rhode Island and Providence Plantations

NON-PROFIT CORPORATION

29122

Corporate ID Number ~~27-2642260~~

Annual Report for the year 1990

FIRST: The name of the corporation is PASQUAG LAKE SHORES IMPROVEMENT ASSOCIATION

SECOND: It is incorporated under the laws of THE STATE OF RHODE ISLAND

THIRD: The character of the affairs which it is actually conducting in Rhode Island, briefly stated, is THE IMPROVEMENT OF HEALTH, SAFETY AND RECREATION OF MEMBERS OF THIS ORGANIZATION

FOURTH: If a foreign corporation, the address of its principal office in the state or country under the laws of which it is incorporated is

FIFTH: Corporate address in Rhode Island PO Box 239 CHEPACHET RI 02814

362 LAKE DRIVE CHEPACHET RI 02814

SIXTH: Names and addresses of its directors and officers:

(Addresses must include street, number if any, and zip code)

NAME	OFFICE	ADDRESS
	Director	
	Director	
	Director	
DAVID CHARRON	President	396 LAKE DR. CHEPACHET RI 02814
DAVID THERBERGE	Vice President	FIRST ROAD CHEPACHET RI 02814
DEBRA CHARRON	Secretary	396 LAKE DR. CHEPACHET RI 02814
RON WETH	Treasurer	237 LAKE DR. CHEPACHET RI 02814

Dated: April 9 19 94

PASQUAG LAKE SHORES IMPROVEMENT ASSOCIATION
(Name of Corporation)

By Dora M Pereira

Title 93-94 Secretary

(Report must be signed by an officer)

FILED
APR 15 1994
By ME59121739

If the corporation has changed its registered office and/or its registered agent, Form N-14 must be filed. Please contact Corporation Division for information, 277-3040 Mail with fee to: Corporations Division, 100 North Main Street, Providence, RI 02903.

State of Rhode Island and Providence Plantations

NON-PROFIT CORPORATION

Corporate ID Number 29122 ~~22-2642760~~ Annual Report for the year 1989

FIRST: The name of the corporation is PEECOK LAKE SHORES IMPROVEMENT ASSOCIATION

SECOND: It is incorporated under the laws of THE STATE OF RHODE ISLAND

THIRD: The character of the affairs which it is actually conducting in Rhode Island, briefly stated, is THE IMPROVEMENT OF HEALTH, SAFETY, AND RECREATION OF MEMBERS OF THIS ORGANIZATION

FOURTH: If a foreign corporation, the address of its principal office in the state or country under the laws of which it is incorporated is

FIFTH: Corporate address in Rhode Island P.O. Box 239 CHEPACHET, RI 02814 362 LAKE DRIVE CHEPACHET RI 02814

SIXTH: Names and addresses of its directors and officers:

(Addresses must include street, number if any, and zip code)

Table with 3 columns: NAME, OFFICE, ADDRESS. Rows include David Charbon (President), David Therberge (Vice President), Debra Charbon (Secretary), and Ron Loeth (Treasurer).

Dated: April 9 19 94

PEECOK LAKE SHORES IMPROVEMENT ASSOCIATION (Name of Corporation)

FILED APR 15 1994 BY ME59121739

By [Signature] Title 9371 SECRETARY

(Report must be signed by an officer)

If the corporation has changed its registered office and/or its registered agent, Form N-14 must be filed. Please contact Corporation Division for information, 277-3040 Mail with fee to: Corporations Division, 100 North Main Street, Providence, RI 02903.

Filing Fee: \$10.00

To be filed annually during the month of June

State of Rhode Island and Providence Plantations

NON-PROFIT CORPORATION

Corporate ID Number 29122 Annual Report for the year 1988

FIRST: The name of the corporation is PASCOAG LAKE SHORES IMPROVEMENT ASSOCIATION

SECOND: It is incorporated under the laws of Rhode Island

THIRD: The character of the affairs which it is actually conducting in Rhode Island, briefly stated, is ENCOURAGEMENT + PROMOTION OF REGULATIONS TO MAINTAIN + EMPLOY OUR PRIVATE COLONY AROUND THE SHORES OF PASCOAG LAKE

FOURTH: If a foreign corporation, the address of its principal office in the state or country under the laws of which it is incorporated is.....

FIFTH: Corporate address in Rhode Island Pascoag Lake Shores Imp. Assu.
% GERALYN BRAIS 62 CENTER ROAD CHEPACHET RI 02814

SIXTH: Names and addresses of its directors and officers:

(Addresses must include street, number if any, and zip code)

MAR 14 1989
SECY OF STATE
[Signature]

NAME	OFFICE	ADDRESS
.....	Director	.....
.....	Director	.....
.....	Director	.....
<u>DONALD L MILLER</u>	President	<u>713 FIRST RD CHEPACHET RI 02814</u>
<u>PAUL BRAIS</u>	Vice President	<u>62 CENTER ROAD CHEPACHET RI 02814</u>
<u>GERALYN BRAIS</u>	Secretary	<u>62 CENTER ROAD CHEPACHET RI 02814</u>
<u>THOMAS E THORNDYKE</u>	Treasurer	<u>P.O. BOX 92 LAKE SHORES CHEPACHET RI 02814</u>

Dated: 10-28-88 19 88

Pascoag Lake Shores Imp. Assu.
(Name of Corporation)

By Donald L Miller
Title President

(Report must be signed by an officer)

If the corporation has changed its registered office and/or its registered agent, Form N-14 must be filed. Please contact Corporation Division for information, 277-3040
Mail with fee to: Corporations Division, 270 Westminister Mall, Providence, RI 02903.

Filing Fee: \$10.00

To be filed annually during the month of June

State of Rhode Island and Providence Plantations

NON-PROFIT CORPORATION

Corporate ID Number 29122

Annual Report for the year 1987

FIRST: The name of the corporation is PASCOAG LAKE SHORES IMPROVEMENT ASSOCIATION

SECOND: It is incorporated under the laws of Rhode Island

THIRD: The character of the affairs which it is actually conducting in Rhode Island, briefly stated, is.....
ENCOURAGEMENT + PROMOTION OF REGULATIONS TO MAINTAIN + IMPROVE OUR PRIVATE COLONY AROUND THE SHORES OF PASCOAG LAKE

FOURTH: If a foreign corporation, the address of its principal office in the state or country under the laws of which it is incorporated is.....

FIFTH: Corporate address in Rhode Island Pascoag Lake Shores Imp. Assn.

70 GERALYN BRAIS 62 CENTER ROAD CHEPACHET RI 02814

SIXTH: Names and addresses of its directors and officers:

(Addresses must include street, number if any, and zip code)

PAID
MAR 12 1989
SECY OF STATE

NAME	OFFICE	ADDRESS
.....	Director	.....
.....	Director	.....
.....	Director	.....
<u>DONALD MILLER</u>	President	<u>213 FIRST RD chepachet RI 02814</u>
<u>PAUL BRAIS</u>	Vice President	<u>62 center rd chepachet RI 02814</u>
<u>GERALYN BRAIS</u>	Secretary	<u>62 center rd chepachet RI 02814</u>
<u>Thomas C. ...</u>	Treasurer	<u>P.O. Box 92 Lake Drive Chepachet RI 02814</u>

Dated: 10-28 19 88

Pascoag Lake Shores Imp. Assn.

(Name of Corporation)

By Donald S. Miller

Title President

(Report must be signed by an officer)

If the corporation has changed its registered office and/or its registered agent, Form N-14 must be filed. Please contact Corporation Division for information, 277-3040
Mail with fee to: Corporations Division, 270 Westminster Mall, Providence, RI 02903.

Filing Fee: \$10.00

To be filed annually during the month of June

State of Rhode Island and Providence Plantations

NON-PROFIT CORPORATION

Corporate ID Number 29122 Annual Report for the year 1986

FIRST: The name of the corporation is PASCOAG LAKE SHORES IMPROVEMENT ASS.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: The character of the affairs which it is actually conducting in Rhode Island, briefly stated, is

FOURTH: If a foreign corporation, the address of its principal office in the state or country under the laws of which it is incorporated is

FIFTH: Corporate address in Rhode Island

SIXTH: Names and addresses of its directors and officers:

(Addresses must include street, number if any, and zip code)

NAME	OFFICE	ADDRESS
	Director	
	Director	
	Director	
<u>DONALD KOCH</u>	President	
<u>ROBERT SHIELDS</u>	Vice President	<u>PO Box 617 Chepachet RI 02814</u>
<u>JO ANN KOCH</u>	Secretary	
<u>THOMAS ETHERIDGE</u>	Treasurer	<u>PO Box 92 Lake Dr. Chepachet RI 02814</u>

Dated: 3-MARCH 19 87

03/10/87

PASCOAG LAKE SHORES IMPROVEMENT ASS.
(Name of Corporation)

PAID

By Thomas Etheridge

Title

Treasurer

MAR 10 1987
KRD

(Report must be signed by an officer)

If the corporation has changed its registered office and/or its registered agent, Form N-14 must be filed. Please contact Corporation Division for information, 277-3040
Mail with fee to: Corporations Division, 270 Westminster Mall, Providence, RI 02903.

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State of Rhode Island and Providence Plantations

BIENNIAL REPORT OF
NON-BUSINESS CORPORATION.

(FEE FOR FILING, \$10.00)

To be filed in the month of FEBRUARY, of each even year, in the office of the SECRETARY OF STATE, PROVIDENCE, by corporations incorporated under the laws of the State of Rhode Island; in accordance with the provisions of § 7-6-14 of CHAPTER 7-6 of the GENERAL LAWS OF RHODE ISLAND 1956 (NON-BUSINESS CORPORATIONS). (FEE FOR FILING \$10.00; Maximum penalty for failure to file, \$50, and possible forfeiture of charter.)

The PASCOAG LAKE SHORES IMPROVEMENT ASSOCIATION,

a corporation created under the laws of the State of Rhode Island does hereby make the following report, as required by § 7-6-14 of Chapter 7-6 of the General Laws of 1956 as amended:—

- (1.) Name of Corporation PASCOAG LAKE SHORES IMPROVEMENT ASSOCIATION
- (2.) Location of Principal Office in Rhode Island RD 2 Box 633 LAKE DRIVE
CHEMUNNET RHODE ISLAND 02814
(No. Street, City or Town)
- (3.) Names and addresses of all Officers, and Date of Expiration of Term of Office of each:—

OFFICE.	NAME.	ADDRESS.	TERM EXPIRES.
PRESIDENT -	DANA L. BISHOP	LAKE DRIVE CHEMUNNET RI	AUGUST 1984
VICE PRES -	ROBERT SHIELDS	CLATER RD, CHEMUNNET RI	AUGUST 1984
TREASURER -	EMILE FONTAINE	LAKE DR, CHEMUNNET RI	AUGUST 1984
SECRETARY -	PHYLLIS FONTAINE	LAKE DR, CHEMUNNET RI	AUGUST 1984

(4.) Date Appointed for Next Annual Meeting of the Corporation AUGUST 1984

I hereby certify the foregoing to be correct:—

OCT 31 1984
LEX

Dana L. Bishop
(Name) (Designation of Officer Certifying)
DANA L. BISHOP
PRESIDENT

10/31/84
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10.00

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29122

State of Rhode Island and Providence Plantations

BIENNIAL REPORT OF
NON-BUSINESS CORPORATION.

(FEE FOR FILING, \$10.00)

To be filed in the month of FEBRUARY, of each even year, in the office of the SECRETARY OF STATE, PROVIDENCE, by corporations incorporated under the laws of the State of Rhode Island; in accordance with the provisions of § 7-6-14 of CHAPTER 7-6 of the GENERAL LAWS OF RHODE ISLAND 1956 (NON-BUSINESS CORPORATIONS). (FEE FOR FILING \$10.00; Maximum penalty for failure to file, \$50, and possible forfeiture of charter.)

The Pascoag Lake Shores Improvement Association,

a corporation created under the laws of the State of Rhode Island does hereby make the following report, as required by § 7-6-14 of Chapter 7-6 of the General Laws of 1956 as amended:—

- (1.) Name of Corporation Pascoag Lake Shores Improvement Association
RD #2, Box 633, Lake Drive
- (2.) Location of Principal Office in Rhode Island Chepachet, RI 02814
(No., Street, City or Town)

(3.) Names and addresses of all Officers, and Date of Expiration of Term of Office of each:—

OFFICE.	NAME.	ADDRESS.	TERM EXPIRES.
President	- Dana L. Bishop	Lake Dr., Chepachet, RI	August, 1984
Vice President	- Robert Shields	Center Rd., Chepachet, RI	August, 1984
Treasurer	- Emile Fontaine	Lake Dr., Chepachet, RI	August, 1984
Secretary	- Phyllis Fontaine	Lake Dr., Chepachet, RI	August, 1984

(4.) Date Appointed for Next Annual Meeting of the Corporation August, 1984

I hereby certify the foregoing to be correct:—

Dana L. Bishop
 (Name) (Designation of Officer Certifying)
 Dana L. Bishop
 President

OCT 31 1984

10/31/84 PAID 10.00
BIRP
10.00

State of Rhode Island and Providence Plantations

BIENNIAL REPORT OF
NON-BUSINESS CORPORATION.

(FEE FOR FILING, \$10.00)

To be filed in the month of FEBRUARY, of each even year, in the office of the SECRETARY OF STATE, PROVIDENCE, by corporations incorporated under the laws of the State of Rhode Island; in accordance with the provisions of § 7-6-14 of CHAPTER 7-6 of the GENERAL LAWS OF RHODE ISLAND 1956 (NON-BUSINESS CORPORATIONS). (FEE FOR FILING \$10.00; Maximum penalty for failure to file, \$50, and possible forfeiture of charter.)

The *Pascoog Lake Shores Improvement Association*,

a corporation created under the laws of the State of Rhode Island does hereby make the following report, as required by § 7-6-14 of Chapter 7-6 of the General Laws of 1956 as amended:—

- (1.) Name of Corporation *Pascoog Shores Improvement Association*
- (2.) Location of Principal Office in Rhode Island *61 Lake Drive, Chepachet, R.I.*
(No., Street, City or Town) *02814*
- (3.) Names and addresses of all Officers, and Date of Expiration of Term of Office of each:—

OFFICE.	NAME.	ADDRESS.	TERM EXPIRES.
<i>Pres.</i>	<i>N. STUART FREEMAN</i>	<i>7 Jackson Sch. Rd. Chepachet, R.I.</i>	<i>Aug. 8, 1980.</i>
<i>Vice Pres.</i>	<i>Robert Shields</i>	<i>2 Fairmont Ave. Johnston, R.I.</i>	<i>Aug. 8, 1980.</i>
<i>Treas.</i>	<i>Emile Fontaine</i>	<i>52 Lake Dr. Chepachet, R.I.</i>	<i>Aug. 8, 1980.</i>
<i>Secretary</i>	<i>Margaret Knight</i>	<i>Center Rd. Chepachet, R.I.</i>	<i>Aug. 8, 1980.</i>

(4.) Date Appointed for Next Annual Meeting of the Corporation *Aug. 8, 1980*
I hereby certify the foregoing to be correct:—

Emile P. Fontaine
(Name) *Treasurer*
(Designation of Officer Certifying)

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10000

APR 1 1980
H D

State of Rhode Island and Providence Plantations

BIENNIAL REPORT OF
NON-BUSINESS CORPORATION.

(FEE FOR FILING, \$10.00)

To be filed in the month of FEBRUARY, of each even year, in the office of the SECRETARY OF STATE, PROVIDENCE, by corporations incorporated under the laws of the State of Rhode Island; in accordance with the provisions of § 7-6-14 of CHAPTER 7-6 of the GENERAL LAWS OF RHODE ISLAND 1956 (NON-BUSINESS CORPORATIONS). (FEE FOR FILING \$10.00; Maximum penalty for failure to file, \$50, and possible forfeiture of charter.)

The PASCOAG LAKE SHORES IMPROVEMENT ASSOCIATION,

a corporation created under the laws of the State of Rhode Island does hereby make the following report, as required by § 7-6-14 of Chapter 7-6 of the General Laws of 1956 as amended:—

- (1.) Name of Corporation PASCOAG LAKE SHORES IMPROVEMENT ASSOCIATION
- (2.) Location of Principal Office in Rhode Island LAKO DRIVE GLOUCESTER
(No., Street, City or Town)
- (3.) Names and addresses of all Officers, and Date of Expiration of Term of Office of each:—

OFFICE.	NAME.	ADDRESS.	TERM EXPIRES.
President -	N. STUART FREEMAN	JACKSON SCHOOL RD, GLOUCESTER	AUG. 1979
Vice President	ROBERT SHIELDS	2 FAIRMONT AV. J. HANSON	AUG. 1979
TREASURER	EMILE FONTAINE	52 LAKO DRIVE GLOUCESTER	AUG. 1979
SECRETARY	GERTRUDE HAWLEY	16 INGLESIDE AV. CRANSTON	AUG. 1979

(4.) Date Appointed for Next Annual Meeting of the Corporation August 1978
I hereby certify the foregoing to be correct:—

SEP 8 1978
MVC

N. Stuart Freeman
(Name) (Designation of Officer Certifying)

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State of Rhode Island and Providence Plantations

BIENNIAL REPORT OF
NON-BUSINESS CORPORATION.

(FEE FOR FILING, \$10.00)

To be filed in the month of FEBRUARY, of each even year, in the office of the SECRETARY OF STATE, PROVIDENCE, by corporations incorporated under the laws of the State of Rhode Island; in accordance with the provisions of § 7-6-14 of CHAPTER 7-6 of the GENERAL LAWS OF RHODE ISLAND 1956 (NON-BUSINESS CORPORATIONS). (FEE FOR FILING \$10.00; Maximum penalty for failure to file, \$50, and possible forfeiture of charter.)

The Pawcatuck Lake Shore Improvement Association

a corporation created under the laws of the State of Rhode Island does hereby make the following report, as required by § 7-6-14 of Chapter 7-6 of the General Laws of 1956 as amended:—

- (1.) Name of Corporation. Pawcatuck Lake Shore Improvement Association
- (2.) Location of Principal Office in Rhode Island Jackson Shoals Rd. Pawcatuck, R.I.
(No., Street, City or Town)
- (3.) Names and addresses of all Officers, and Date of Expiration of Term of Office of each:—

OFFICE.	NAME.	ADDRESS.	TERM EXPIRES.
President	Alfred J. Lucier	46 Lake Dr. Pawcatuck R.I.	Aug. 1976
Vice President	Robert Skidell	2 Fairmont Ave. Pawcatuck R.I.	Aug. 1976
Secretary	Miss Gertrude Hanley	16 Ingleside Ave. Edgewood R.I.	Aug. 1976
Treasurer	Stuart Freeman	Jackson Shoals Rd Pawcatuck R.I.	Aug. 1976

(4.) Date Appointed for Next Annual Meeting of the Corporation August 1976

I hereby certify the foregoing to be correct:—

Stuart Freeman
(Name) (Designation of Officer Certifying)
Treas

NOV 1 - 1976 *Jm*

State of Rhode Island and Providence Plantations

BIENNIAL REPORT OF
NON-BUSINESS CORPORATION.

(FEE FOR FILING, \$10.00)

To be filed in the month of FEBRUARY, of each even year, in the office of the SECRETARY OF STATE, PROVIDENCE, by corporations incorporated under the laws of the State of Rhode Island; in accordance with the provisions of § 7-6-14 of CHAPTER 7-6 of the GENERAL LAWS OF RHODE ISLAND 1956 (NON-BUSINESS CORPORATIONS). (FEE FOR FILING \$10.00; Maximum penalty for failure to file, \$50, and possible forfeiture of charter.)

The Paseony Lake Shore Improvement Association,

a corporation created under the laws of the State of Rhode Island does hereby make the following report, as required by § 7-6-14 of Chapter 7-6 of the General Laws of 1956 as amended:—

- (1.) Name of Corporation Paseony Lake Shore Improvement Association
- (2.) Location of Principal Office in Rhode Island Jordan Schoolhouse Rd. Chepokat R.I.
(No., Street, City or Town)
- (3.) Names and addresses of all Officers, and Date of Expiration of Term of Office of each:—

OFFICE.	NAME.	ADDRESS.	TERM EXPIRES.
President	Alfred J. Lucien	46 Lake Dr. Chepokat R.I.	Aug. 1977
Vice President	Robert Shields	2 Fairmont Ave. Johnston R.I.	Aug. 1977
Secretary	Miss Dorothea Hanley	16 Ingleside Ave. Edgewood R.I.	Aug. 1977
Treasurer	Stuart Freeman	Jordan Schoolhouse Rd. Chepokat R.I.	Aug. 1977

(4.) Date Appointed for Next Annual Meeting of the Corporation August 1977
I hereby certify the foregoing to be correct:—

Stuart Freeman
(Name) (Designation of Officer Certifying)
Treas

NOV 1 - 1976
Jim

State of Rhode Island and Providence Plantations

BIENNIAL REPORT OF
NON-BUSINESS CORPORATION.

(FEE FOR FILING, \$5.00)

To be filed in the month of FEBRUARY, of each even year, in the office of the SECRETARY OF STATE, PROVIDENCE, by corporations incorporated under the laws of the State of Rhode Island; in accordance with the provisions of § 7-6-14 of CHAPTER 7-6 of the GENERAL LAWS OF RHODE ISLAND 1956 (NON-BUSINESS CORPORATIONS). (FEE FOR FILING \$5.00; Maximum penalty for failure to file, \$50, and possible forfeiture of charter.)

The Pascoag Lake Shores Improvement Association, a corporation created under the laws of the State of Rhode Island does hereby make the following report, as required by § 7-6-14 of Chapter 7-6 of the General Laws of 1956 as amended:—

- (1.) Name of Corporation Pascoag Lake Shores Improvement Association
- (2.) Location of Principal Office in Rhode Island Jackson Schoolhouse Road, Gloucester
(No., Street, City or Town)
- (3.) Names and addresses of all Officers, and Date of Expiration of Term of Office of each:—

OFFICE.	NAME.	ADDRESS.	TERM EXPIRES.
President	Alfred Lucier,	46 Lake Drive, Box 17, Chepachet, R. I.	August, 1972
Vice-President	Miss Gertrude Hanley,	16 Ingleside Ave. Cranston, R. I.	August, 1972
Treasurer	Andrew Flynn,	9 Octavia Street Providence, R. I.	August, 1972
Secretary	David T. Kearns,	394 River Avenue. Providence, R. I.	August, 1972

- (4.) Date Appointed for Next Annual Meeting of the Corporation July, 1972

I hereby certify the foregoing to be correct:—
David T Kearns Secretary

David T Kearns Sec.
(Name) (Designation of Officer Certifying)

FEB 21 1972

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8 June Feb. 1972
BIENNIAL REPORT

EB 25-72 STATE 085 R*****10

FILED IN THE OFFICE OF THE
SECRETARY OF STATE

2/25 1972

State of Rhode Island and Providence Plantations

BIENNIAL REPORT OF
NON-BUSINESS CORPORATION.

(FEE FOR FILING, \$5.00)

To be filed in the month of FEBRUARY, of each even year, in the office of the SECRETARY OF STATE, PROVIDENCE, by corporations incorporated under the laws of the State of Rhode Island; in accordance with the provisions of § 7-6-14 of CHAPTER 7-6 of the GENERAL LAWS OF RHODE ISLAND 1956 (NON-BUSINESS CORPORATIONS). (FEE FOR FILING \$5.00; Maximum penalty for failure to file, \$50, and possible forfeiture of charter.)

The PASCOAG LAKE SHORES IMPROVEMENT ASSOCIATION

a corporation created under the laws of the State of Rhode Island does hereby make the following report, as required by § 7-6-14 of Chapter 7-6 of the General Laws of 1956 as amended:—

- (1.) Name of Corporation PASCOAG LAKE SHORES IMPROVEMENT ASS.
- (2.) Location of Principal Office in Rhode Island CHEPACHET R.I.
(No., Street, City or Town)
- (3.) Names and addresses of all Officers, and Date of Expiration of Term of Office of each:—

OFFICE.	NAME.	ADDRESS.	TERM EXPIRES.
	<u>PRES. ALFRED LUCIER</u>	<u>CHEPACHET R.I.</u>	<u>1970</u>
<u>Secy</u>	<u>MISS HANLEY</u>	<u>" " "</u>	<u>1970</u>
	<u>TREAS. ANDREW FLYNN</u>	<u>9 OCTAVIA ST. PROV. R.I.</u>	<u>1970</u>
	<u>DAVID T. KEARNS</u>	<u>394 RIVER AVE. - PROV. R.I. - 02908</u>	<u>1970</u>

(4.) Date Appointed for Next Annual Meeting of the Corporation AUG 16 1970

I hereby certify the foregoing to be correct:—

David T Kearns Sec.
(Name) (Designation of Officer Certifying)

BIENNIAL REPORT

OFFICE OF THE SECRETARY OF STATE
AUG 3 1970

FILED IN THE OFFICE OF THE
SECRETARY OF STATE

AUG 3 1970

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State of Rhode Island and Providence Plantations

BIENNIAL REPORT OF
NON-BUSINESS CORPORATION.

(FEE FOR FILING, \$5.00)

To be filed in the month of FEBRUARY, of each even year, in the office of the SECRETARY OF STATE, PROVIDENCE, by corporations incorporated under the laws of the State of Rhode Island; in accordance with the provisions of § 7-6-14 of CHAPTER 7-6 of the GENERAL LAWS OF RHODE ISLAND 1956 (NON-BUSINESS CORPORATIONS). (FEE FOR FILING \$5.00; Maximum penalty for failure to file, \$50, and possible forfeiture of charter.)

The PASCOAG LAKE SHORES IMPROVEMENT ASSOCIATION,

a corporation created under the laws of the State of Rhode Island does hereby make the following report, as required by § 7-6-14 of Chapter 7-6 of the General Laws of 1956 as amended:—

- (1.) Name of Corporation As ABOVE
- (2.) Location of Principal Office in Rhode Island CHPACHET (GLASSBORO RT)
(No., Street, City or Town)
- (3.) Names and addresses of all Officers, and Date of Expiration of Term of Office of each:—

OFFICE.	NAME.	ADDRESS.	TERM EXPIRES.
PRESIDENT	ALFRED LUGIER	CHPACHET	1969
VICE "	SAMSON	"	1969
ANDREW B FLYNN	77 MOOR ST.	PROVIDENCE	
DA SECRETARY-	DAVID T KEARNS	394 RIVER AVE-PROV.	1969

(4.) Date Appointed for Next Annual Meeting of the Corporation 7/3 1969

I hereby certify the foregoing to be correct:—

David T Kearns Sec.
(Name) (Designation of Officer Certifying)

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BIENNIAL REPORT

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FILED IN THE OFFICE OF THE
SECRETARY OF STATE

AUG 20 1968 19

State of Rhode Island and Providence Plantations

BIENNIAL REPORT OF
NON-BUSINESS CORPORATION.

(FEE FOR FILING, \$5.00)

To be filed in the month of FEBRUARY, of each even year, in the office of the SECRETARY OF STATE, PROVIDENCE, by corporations incorporated under the laws of the State of Rhode Island; in accordance with the provisions of § 7-6-14 of CHAPTER 7-6 of the GENERAL LAWS OF RHODE ISLAND 1956 (NON-BUSINESS CORPORATIONS). (FEE FOR FILING \$5.00; Maximum penalty for failure to file, \$50, and possible forfeiture of charter.)

The Pascoog Lake Shores Imp. Assn.

a corporation created under the laws of the State of Rhode Island does hereby make the following report, as required by § 7-6-14 of Chapter 7-6 of the General Laws of 1956 as amended:—

- (1.) Name of Corporation Pascoog Lake Shores Imp. Assn.
- (2.) Location of Principal Office in Rhode Island Chepachet
(No., Street, City or Town)
- (3.) Names and addresses of all Officers, and Date of Expiration of Term of Office of each:—

OFFICE.	NAME.	ADDRESS.	TERM EXPIRES.
Pres.	Alfred J. Lucier	46 Lake Drive	Chepachet Sept 1966
Vice Pres.	Thomas Etheridge	Salisbury Road	Chepachet Sept 1966
Sec.	Richard Miller	Pine Road	Chepachet Sept 1966
Treas.	Andrew B. Flynn	9 Octavia St	Providence Sept 1966

- (4.) Date Appointed for Next Annual Meeting of the Corporation Aug. 28, 1966
I hereby certify the foregoing to be correct:—

Andrew B. Flynn
(Name) (Designation of Officer Certifying)

1966
BIENNIAL REPORT

Lawrence J. DeLoe
Superintendent

AUG 30-66 STATE SEC-714 RE*****5.00

FILED IN THE OFFICE OF THE
SECRETARY OF STATE

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State of Rhode Island and Providence Plantations

BIENNIAL REPORT OF
NON-BUSINESS CORPORATION.

(FEE FOR FILING, \$5.00)

To be filed in the month of FEBRUARY, of each even year, in the office of the SECRETARY OF STATE, PROVIDENCE, by corporations incorporated under the laws of the State of Rhode Island; in accordance with the provisions of § 7-6-14 of CHAPTER 7-6 of the GENERAL LAWS OF RHODE ISLAND 1956 (NON-BUSINESS CORPORATIONS). (FEE FOR FILING \$5.00; Maximum penalty for failure to file, \$50, and possible forfeiture of charter.)

The Pascoag Lake Improvement Association,

a corporation created under the laws of the State of Rhode Island does hereby make the following report, as required by § 7-6-14 of Chapter 7-6 of the General Laws of 1956 as amended:—

- (1.) Name of Corporation Pascoag Lake Improvement Association
(2.) Location of Principal Office in Rhode Island Jackson School House Rd Chepachet
(No., Street, City or Town)
(3.) Names and addresses of all Officers, and Date of Expiration of Term of Office of each:—

OFFICE.	NAME.	ADDRESS.	TERM EXPIRES.
President	Alfred Lucier	46 Lake Drive Chepachet	Aug 30, 1964
Vice President	Drene Pestle	3 Lake Drive Chepachet	Aug 30, 1964
Secretary	Ella Lawrence	37 Sayles Ave Pascoag	Aug 30, 1964
Treasurer	Andrew Flynn	9 Octavia St Prov	Aug. 30, 1964

- (4.) Date Appointed for Next Annual Meeting of the Corporation June 7 1964

I hereby certify the foregoing to be correct:—

Ella Lawrence Rec. Sec.
(Name) (Designation of Officer Certifying)

BIENNIAL REPORT

Frederic S. Jones
Superintendent of Correction

STATE OF MISSISSIPPI
1927 COMMISSION

FILED IN THE OFFICE OF THE
SECRETARY OF STATE

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