State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: 201
Non-Profit Corporation

2019

FILED
JUN 1 3 2019 02

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→ Filing period: June	1 - June 30
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→ Filing Fee: \$20.00

-> Penalty: Additional \$25.00 fee if form is not filed by July 30.

1. Entity ID Number 29835	2. Exact name of the Corporation Sunrise Acres Civic Association, Inc.					
3. State of Incorporation	5. Brief description of the character of business conducted in Rhode Island					
RI	Beach Association - meets annually to discuss beach, pond and road business					
4. NAICS Code						
813319 - Other Social Advoc						
6. Principal Office Address			City	State	Zip	
134 Hoxie Avenue			Charlestown	RI	02813	
7. List ALL officers (names and add	dresses)			Check the box to indic	ate an attachment	
President Name G. Gregory Bertles			Vice-President Name Raymond Cieplik			
Street Address 220 Hoxie Avenue			Street Address 140 Hoxie Avenue			
City Charlestown	State RI	^{Zip} 02813	City Charlestown	State RI	Zip 02813	
Secretary Name LOis Lovvoll	tary Name LOis Lovvoll Treasurer Name Gregory Plu			lunkett		
Street Address 134 Hoxie Avenue			Street Address 43 Hoxie Avenue			
^{City} Charlestown	State R1	Zip 02813	City Charlestown	State RI	Zip 02813	
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment						
Director Name Linda Catalano			Director Name Richard Caldon			
Street Address 175 Hoxie Avenue			Street Address 83 Hoxie Avenue			
City Charlestown	State Rt	^{Zip} 02813	City Charlestown	State RI	^{Zip} 02813	
Director Name Jerry Aldieri			Director Name Lynn Kells			
Street Address 5 Ruy Road			Street Address 1541 Peth Road			
^{City} Southington	State CT	Zip 06489	City Manlius	State NY	^{Zip} 13104	
9. Registered Agent in Rhode Islan	id. This informatio	on is currently of recor	d in the Department of State. Chan	iges require filing Form 64	11.	
Under penalty of perjury, I decia statements, and that all stateme				ccompanying schedu	ules and	
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	Date		
Gregory Plunkett			6-7-2019	6-7-2019		
Signature of Officer Authorized Rep	resentative	nekett	ULTENT HERE			

MAIL TO:

Division of Business Services

148 W. River Street. Providence. Rhode Island 02904-2615

June 2019
Additional Directors for:
Sunrise Acres Civic Association, Inc
ENTITY 29835

Linda TenEyck

18 Edgemere Street Pelham Manor, NY 10801

Thomas Newman

55 McGruffy Lane Delmar, NY 12054

David Twardy

110 Summit Crest Drive Glastonbury, CT 06073

William Teed

41 Minister Brook Drive Simsbury, CT 06070

Oliver LeDuc

107 White Deer Rock Road Middlebury, CT 06762