



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

**FILED**

**JUN 14 2019**

BY 1363 DS

**Annual Report for the year: 2019**

**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 <b>000531999</b>		2. Exact name of the Corporation <b>Rosner Avenue Condominium Association</b>	
3. State of Incorporation <b>Rhode Island</b>		5. Brief description of the character of business conducted in Rhode Island <b>Collection of Condominium Fees located at 1 Rosner Avenue, North Providence, RI and payment of associated bills</b>	
4. NAICS Code <b>813910 - Business Assoc</b> <input type="checkbox"/>			
6. Principal Office Address <b>1 ROSNER AVENUE</b>		City <b>NORTH PROVIDENCE</b>	State <b>RI</b>
		Zip <b>02904</b>	
7. List ALL officers (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>			
President Name <b>CHRISTINE PITI</b>		Vice-President Name <b>FRANCINE MONFILS</b>	
Street Address <b>1 ROSNER AVENUE, UNIT 4</b>		Street Address <b>1 ROSNER AVENUE, UNIT 3</b>	
City <b>NORTH PROVIDENCE</b>	State <b>RI</b>	City <b>NORTH PROVIDENCE</b>	State <b>RI</b>
Zip <b>02904</b>		Zip <b>02904</b>	
Secretary Name <b>VARDHAN KALKUNTE SRINIVASA</b>		Treasurer Name <b>CHRISTINE PITI</b>	
Street Address <b>1 ROSNER AVENUE, UNIT 1</b>		Street Address <b>1 ROSNER AVENUE, UNIT 4</b>	
City <b>NORTH PROVIDENCE</b>	State <b>RI</b>	City <b>NORTH PROVIDENCE</b>	State <b>RI</b>
Zip <b>02904</b>		Zip <b>02904</b>	
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 <b>CHRISTINE PITI</b>		Director Name <b>FRANCINE MONFILS</b>	
Street Address <b>1 ROSNER AVENUE, UNIT 4</b>		Street Address <b>1 ROSNER AVENUE, UNIT 3</b>	
City <b>NORTH PROVIDENCE</b>	State <b>RI</b>	City <b>NORTH PROVIDENCE</b>	State <b>RI</b>
Zip <b>02904</b>		Zip <b>02904</b>	
Director Name <b>VARDHAN KALKUNTE SRINIVASA</b>		Director Name	
Street Address <b>1 ROSNER AVENUE, UNIT 1</b>		Street Address	
City <b>NORTH PROVIDENCE</b>	State <b>RI</b>	City	State
Zip <b>02904</b>		Zip	
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>			
<i>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee</i>			
Name of Officer/Authorized Representative <b>CHRISTINE PITI</b>			Date <b>6/12/19</b>
Signature of Officer/Authorized Representative 			

**MAIL TO:**  
 Division of Business Services  
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