



State of Rhode Island and Providence Plantations

## Department of State - Business Services Division

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.

RECEIVED  
SECRETARY OF STATE  
CORPORATIONS DIV  
2019 JUN 14 4:11:16  
FILED  
JUN 14 2019

BY

3115 OS

1. Entity ID Number <b>000792347</b>		2. Exact name of the Corporation <b>Twenty Two Miles Avenue Owner's Association, Inc.</b>			
3. State of Incorporation <b>RI</b>		5. Brief description of the character of business conducted in Rhode Island <b>Management of Owners Association.</b>			
4. NAICS Code <b>813990 - Other Similar Or</b> <input type="checkbox"/>					
6. Principal Office Address <b>c/o CRS Management, LLC., 786 Oaklawn Ave.</b>			City <b>Cranston</b>	State <b>RI</b>	Zip <b>02920</b>
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name <b>Patricia Lawlor</b>			Vice-President Name		
Street Address <b>32 Miles Avenue</b>			Street Address		
City <b>Providence</b>	State <b>RI</b>	Zip <b>02906</b>	City	State	Zip
Secretary Name <b>Nic Lin</b>			Treasurer Name <b>Kevin Cunningham</b>		
Street Address <b>24 Miles Avenue</b>			Street Address <b>28 Miles Avenue</b>		
City <b>Providence</b>	State <b>RI</b>	Zip <b>02906</b>	City <b>Providence</b>	State <b>RI</b>	Zip <b>02906</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>Patricia Lawlor</b>			Director Name <b>Kevin Cunningham</b>		
Street Address <b>32 Miles Avenue</b>			Street Address <b>28 Miles Avenue</b>		
City <b>Providence</b>	State <b>RI</b>	Zip <b>02906</b>	City <b>Providence</b>	State <b>RI</b>	Zip <b>02906</b>
Director Name <b>Nic Lin</b>			Director Name		
Street Address <b>24 Miles Avenue</b>			Street Address		
City <b>Providence</b>	State <b>RI</b>	Zip <b>02906</b>	City	State	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>					
<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 <b>Carlene DelNero</b>				Date <b>06/12/19</b>	
Signature of Officer/Authorized Representative <i>Carlene DelNero</i> SIGN DOCUMENT HERE					

## MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040

Website: www.sos.ri.gov