RI SOS Filing Number: 201901792140 Date: 7/5/2019 4:00:00 PM

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: 2010

FILED

JUL 05 2019

Non-Profit Corporation	2013		
→ Filing period: June 1 - June 30			
-> Filing Fee: \$20.00			

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

4 Falls ID Number	To 5					
1. Entity ID Number	I	of the Corporation	•	• 4•		
000140827	Ocean Breeze Condominium Association					
3. State of Incorporation	5. Brief description of the character of business conducted in Rhode Island					
RI	Manage the affairs of the condominium association					
4. NAICS Code	1				1	
813990 - Other Similar Orgai	ļ					
6. Principal Office Address			City	State	Zip	
181 Knight Street	181 Knight Street		Warwick	RI	02886	
7. List ALL officers (names and addresses) Check the box to indicate an attachment						
President Name Mark Agruso	President Name Mark Agruso			Vice-President Name Candace Saugy		
Street Address 82 Main Street				Street Address 118 Eden Crest Drive		
City Windsor Locks	State CT	^{Zip} 06096	City Cranston	State RI	Zip 02920	
Secretary Name Eleanor McSally		Treasurer Name Meghan Muri	Treasurer Name Meghan Murray			
Street Address 21 Starr Drive, #202		- 	Street Address 21 Starr Drive, #203			
^{City} Narragansett	State RI	^{Zip} 02882	City Narragansett	State RI	^{Zip} 02882	
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment						
Director Name Mark Agruso			Director Name Candace Saugy			
Street Address 82 Main Street		Street Address 118 Eden Crest Drive				
^{City} Windsor Locks	State CT	^{Zip} 06096	City Cranston	State RI	^{Zip} 02920	
Director Name Eleanor McSally			Director Name Meghan Murra	ay		
Street Address 21 Starr Drive, #202		Street Address 21 Starr Drive	Street Address 21 Starr Drive, #203			
City Narragansett	State RI	^{Zip} 02882	City Narragansett	State RI	^{Zip} 02882	
9. Registered Agent in Rhode Island						
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						
Mark Agruso, President				6-21-	19	
Signature of Officer/Aut/brized Representative SIGN DOCUMENT HERE						

MAIL TO:

Website: www.sos.n.gov

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615 Phone: (401) 222-3040

FORM 631 - Revised: 03/2019

2019 Annual Report

ENTITY ID NUMBER:

ENTITY NAME:

000140827

Ocean Breeze Condominium Association

Additional Directors:

Judith Mack 21 Starr Drive, #104 Narragansett, RI 02882

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JUL 05 2019

BY 1301 DS

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