



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.

FILED

JUL 24 2019

BY

1780 DS

1. Entity ID Number 000039205		2. Exact name of the Corporation Ocean Ridge Civic Association			
3. State of Incorporation RI		5. Brief description of the character of business conducted in Rhode Island Neighborhood civic association			
4. NAICS Code 813319 - Other Social Advoca					
6. Principal Office Address 83 Holly Road			City South Kingstown	State RI	Zip 02879
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name David Allesandro			Vice-President Name Brenda Hrtanek		
Street Address 188 Balsam Road			Street Address 98 Shorefront Park		
City South Kingstown	State RI	Zip 02879	City Norwalk	State CT	Zip 06854
Secretary Name Margot Willis-Doyle			Treasurer Name Janice Steinmetz		
Street Address 48 Ram Island Road			Street Address 190 South Road, PO Box 363		
City Charlestown	State RI	Zip 02813	City Somers	State CT	Zip 06071
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment <input checked="" type="checkbox"/>					
Director Name Gary Grimmer			Director Name Lauren Johnston		
Street Address 44 Ram Island Road			Street Address 15845 Marcello Circle		
City Charlestown	State RI	Zip 02813	City Naples	State FL	Zip 34110
Director Name Willard Pulsifer			Director Name Dave Cappucci		
Street Address 498 North Street			Street Address 116 Balsam Road		
City Terryville	State CT	Zip 06786	City South Kingstown	State RI	Zip 02879
9. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641.					
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.					
<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 Janice Steinmetz Treasurer					Date 07/22/2019
Signature of Officer/Authorized Representative					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

Attachment to report 631

Ocean Ridge Civic Association
PO Box 1465
Charlestown, RI 02813

Report 2019
Entity ID Number 39205

Directors

Phil Moreschi
93 Willow Road
Charlestown, RI 02813

Michael Smith
166 Ram Island Road
Charlestown, RI 02813

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