



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Matthew A. Brown, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401.222.3040

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

Filing Period: June 1 - June 30 • Filing Fee: \$20.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 125362		2. Name of Corporation Crystal Creek Home Owners Association, Inc.			
3. State of Incorporation RHODE ISLAND		4. Corporate address in Rhode Island - Street Address 400 RESERVOIR AVENUE		City PROVIDENCE	Zip 00907-
5. Foreign corporation: Enter principal office address			City	State	Zip
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island TO MANAGE THE USE AND ENJOYMENT OF THE OPEN SPACE AREAS AS SUCH AREAS ARE SHOWN ON THE RECORDED SUBDIVISION PLANS FOR CRYSTAL CREEK ESTATES LOCATED IN EAST GREENWICH, RI					
7. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Rocco M. Sammartino			Vice President Name Mal A. Salvatore		
Street Address 400 Reservoir Avenue			Street Address 400 Reservoir Avenue		
City Providence	State RI	Zip 02907	City Providence	State RI	Zip 02907
Secretary Name Mal A. Salvatore			Treasurer Name Rocco M. Sammartino		
Street Address 400 Reservoir Avenue			Street Address 400 Reservoir Avenue		
City Providence	State RI	Zip 02907	City Providence	State RI	Zip 02907
8. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23					
Director Name Lori Sammartino			Director Name Mal A. Salvatore		
Street Address 400 Reservoir Avenue			Street Address 400 Reservoir Avenue		
City Providence	State RI	Zip 02907	City Providence	State RI	Zip 02907
Director Name Rocco M. Sammartino			Director Name		
Street Address 400 Reservoir Avenue			Street Address		
City Providence	State RI	Zip 02907	City	State	Zip
9. REGISTERED AGENT IN RHODE ISLAND -DO NOT ALTER- Changes require filing of Form 641 -R.I.G.L. 7-6-13 / 7-6-78					
Agent Name Mal A. Salvatore			Address		
Address 400 Reservoir Avenue			City Providence	Zip 02907	

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



1 2 5 3 6 2

125362 DNP 06/16/05 11:40:55 AM

File Date 6-17-05

Check No. 1384

By: OW

FOR SECRETARY OF STATE USE ONLY

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.

Signature of Officer
Mal A. Salvatore
Date 6-16-2005
Print or Type Name of Officer
Vice-President
Title of Officer



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Matthew A. Brown, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401.222.3040

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

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(FORM MUST BE TYPED OR PRINTED IN BLACK)

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Secretary Name Mal A. Salvatore			Treasurer Name Rocco M. Sammartino		
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City Providence	State RI	Zip 02907	City Providence	State RI	Zip 02907
Director Name Rocco M. Sammartino			Director Name		
Street Address 400 Reservoir Avenue			Street Address		
City Providence	State RI	Zip 02907	City	State	Zip
9. REGISTERED AGENT IN RHODE ISLAND -DO NOT ALTER- Changes require filing of Form 641 -R.I.G.L. 7-6-13 / 7-6-78					
Agent Name Mal A. Salvatore			Address 400 Reservoir Avenue		
Address			City PROVIDENCE	Zip 02907	

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



125362 DNP 03/23/05 12:20:55 PM

File Date: 3-28-05

Check No. 1381

By: AMF

FOR SECRETARY OF STATE USE ONLY

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.

Mal A. Salvatore
Signature of Officer
Date: 3/22/05

Mal A. Salvatore
Print or Type Name of Officer
Vice-President
Title of Officer

RECEIVED
SECRETARY OF STATE
CORPORATIONS DIVISION
05 MAR 2005 11:47 AM



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Matthew A. Brown, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401.222.3640

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003

Filing Period: June 1 - June 30 • Filing Fee: \$20.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. *125362*		2. Name of Corporation Crystal Creek Home Owners Association, Inc.			
3. State of Incorporation RHODE ISLAND		4. Corporate address in Rhode Island - Street Address 400 Reservoir Avenue		City Providence	Zip 02907
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City Providence	State RI	Zip 02907	City Providence	State RI	Zip 02907
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Street Address 400 Reservoir Avenue		Street Address 400 Reservoir Avenue			
City Providence	State RI	Zip 02907	City Providence	State RI	Zip 02907
Director Name Rocco M. Sammartino		Director Name			
Street Address 400 Reservoir Avenue		Street Address			
City Providence	State RI	Zip 02907	City	State	Zip
9. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER. Changes require filing of Form 641. (R.I.G.L. 7-6-13/7-6-38)					
Agent Name MAL A. SALVADORE		Address 400 RESERVOIR AVENUE			
Address		City PROVIDENCE		Zip 02907-	

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 1 2 5 3 6 2 *

**125362* 6/16/03 08:41 PM*

File Date 7-17-03

Check No 1253

By AMF

FOR SECRETARY OF STATE USE ONLY

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.

Mal A. Salvatore 7/16/2003
Signature of Officer Date
MAL A. SALVADORE
Print or Type Name of Officer
VICE-PRESIDENT
Title of Officer