



**State of Rhode Island and Providence Plantations
Office of the Secretary of State**

Fee: \$20.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Non-Profit Corporation
Annual Report**

Filing Period: June 1 - June 30

In accordance with R.I.G.L. 7-6-94, each corporation failing or refusing to file its annual report within the time prescribed by law (R.I.G.L. 7-6-91) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2020

1. Corporate ID No. 000047120

2. Name of Corporation Capella South Condominium Association, Inc.

3. State of Incorporation

State: RI

ARTICLE III

Using the dropdown labeled NAICS Code below, select the classification title that describes the primary type of activity in which your entity engages. The box to the right of the dropdown will populate a NAICS Code based on the chosen selection. If the NAICS Code is known, enter it into the box on the right. For further assistance with selecting a classification [click here](#).

NAICS Code

6

813990

4. Corporate Address in Rhode Island

No. and Street: C/O PREMIER PROPERTY MANAGEMENT
26 VALLEY RD STE 203

City or Town: MIDDLETOWN

State: RI Zip: 02842 Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street:

City or Town: State: Zip: Country:

6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island

GOVERNING THE ADMINISTRATION, REGULATION, USE, OPERATION, MANAGEMENT,
OCCUPATION & MAINTENANCE OF CONDOMINIUMS

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed. If officers and/or directors have been elected, the title

Incorporator is no longer applicable; please delete

THE NUMBER OF DIRECTORS OF A DOMESTIC(RHODE ISLAND)CORPORATION SHALL NOT BE LESS THAN THREE(3). R.I.G.L. 7-6-23

| Title | Individual Name First, Middle, Last, Suffix | Address Address, City or Town, State, Zip Code, Country |
|----------------|---|---|
| PRESIDENT | EVERETT GREENE | 1117 CAPELLA SOUTH - GOAT ISLAND NEWPORT, RI 02840 USA |
| TREASURER | TOM OBRIEN | 1217 CAPELLA SOUTH - GOAT ISLAND NEWPORT, RI 02840 USA |
| SECRETARY | NEAL SMITH | 1312 CAPELLA SOUTH NEWPORT, RI 02840 USA |
| VICE PRESIDENT | ANDREW PAPPAS | 1213 CAPELLA SOUTH - GOAT ISLAND NEWPORT, RI 02840 USA |
| DIRECTOR | TOM OBRIEN | 1217 CAPELLA SOUTH - GOAT ISLAND NEWPORT, RI 02840 USA |
| DIRECTOR | NEAL SMITH | 1312 CAPELLA SOUTH NEWPORT, RI 02840 USA |
| DIRECTOR | ANDREW PAPPAS | 1213 CAPELLA SOUTH - GOAT ISLAND NEWPORT, RI 02840 USA |
| DIRECTOR | LAURENE OLDAKOWSKI | 1101 CAPELLA SOUTH - GOAT ISLAND NEWPORT, RI 02840 USA |
| DIRECTOR | PHILIP MINTZ | 198 NW 67TH ST. APT. 508 BOCA RATON, FL 33487 USA |
| DIRECTOR | SAMUEL SHAMOON | 200 EXCHANGE ST. APT 117 PROVIDENCE, RI 02903 USA |
| DIRECTOR | EVERETT GREENE | 1117 CAPELLA SOUTH - GOAT ISLAND NEWPORT, RI 02840 USA |

**8. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78**

CHARLES D. BLACKMAN, ESQ. 469 ANGELL STREET, SUITE 2 PROVIDENCE , RI 02906

9. This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver, or Trustee.

Signed this 30 Day of June, 2020 at 2:48:09 PM by the authorized person. This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-6.

By EVERETT GREENE
Signature of Authorized Person

Form No. 631
Revised 09/07

