RI SOS Filing Number: 202044027630 Date: 6/29/2020 4:00:00 PM



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: **Non-Profit Corporation**

2020

-> Filing period: June 1 - June 30

→ Filing Fee. \$20.00

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

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BY 100	

1. Entity ID Number	2. Exact name of the Corporation						
000029891	Sweet Meadows Condominium Association, Inc.						
3. State of Incorporation	Brief description of the character of business conducted in Rhode Island						
RI	Manage the affairs of the condominium association.						
4. NAICS Code	_						
813990 - Other Similar Orga							
6. Principal Office Address			City	State	Zıp		
181 Knight Street			Warwick	RI	02886		
7. List ALL officers (names and addresses) Check the box to indicate an attachment							
President Name Judith D'Agostino			Vice-President Name Dennis Jansson				
Street Address 30 Sweet Meadows Court, #9			Street Address 39 South Pier Road				
^{City} Narragansett	State RI	^{Zip} 02882	City Narragansett	State RI	^{Zip} 02882		
Secretary Name Katherine Miller	<u> </u>		Treasurer Name Carin Solonia				
Street Address 30 Sweet Meadows Court, #27			Street Address 308 West Avon Road				
^{City} Narragansett	State RI	^{Zip} 02882	City Avon	State CT	Z _{IP} 06001		
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment							
Director Name Judith D'Agostino			Director Name Dennis Jansson				
Street Address 30 Sweet Meadows Court, #9			Street Address 39 South Pier Road				
^{City} Narragansett	State RI	Zip 02882	City Narragansett	State RI	Zip 02882		
Director Name Katherine Miller			Director Name Carin Solonia				
Street Address 30 Sweet Meadows Court, #27			Street Address 308 West Avon Road				
City Narragansett	State RI	Zip 02882	City Avon	State CT	Zip 06001		
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.							
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							
Judith D'Agostino, President \ \ \osepare \lambda \lam							
Signature of Officer/Authorized Representative Signature of Officer/Authorized Representative Signature of Officer/Authorized Representative Signature of Officer/Authorized Representative							

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov

Entity ID Number:

Name of Corporation:

000029891

Sweet Meadows Condominium Association, Inc.

Additional Directors:

Loretta McCarthy 30 Sweet Meadows Court, #28 Narragansett, RI 02882

Lee Vick 30 Sweet Meadows Court, #14 Narragansett, RI 02882

Louis DiMario 30 Sweet Meadows Court, #11 Narragansett, RI 02882

Phillip Brown 30 Sweet Meadows Court, #6 Narragansett, RI 02882

FILED

JUN 2 9 2020