



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

FILED

Annual Report for the year: 2020

JUL 08 2020 11:11 AM

Non-Profit Corporation

BY filed

- Filing period: June 1 - June 30
- Filing Fee: \$20.00
- Penalty: Additional \$25.00 fee if form is not filed by July 30.

1. Entity ID Number 127038		2. Exact name of the Corporation SEVEN FARMS, INC.			
3. State of Incorporation RHODE ISLAND		5. Brief description of the character of business conducted in Rhode Island TO ACT AS THE GENERAL PARTNER OF COVENTRY APARTMENTS, L.P. A RHODE ISLAND LIMITED PARTNERSHIP			
4. NAICS Code 624229 - Other Communit					
6. Principal Office Address 14 MANCHESTER CIRCLE			City COVENTRY	State Ri	Zip 02816
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name ROBERT I. ELDRED			Vice-President Name DAN SHEA		
Street Address 562 PLAINFIELD PIKE			Street Address 55 TRELIS DRIVE		
City GREENE	State RI	Zip 02827	City WEST WARWICK	State RI	Zip 02893
Secretary Name R. DAVID JERVIS			Treasurer Name MAUREEN K. JENDZEJEC		
Street Address 300 ABBOTTS CROSSING ROAD			Street Address 26 ROBBINS DRIVE		
City COVENTRY	State RI	Zip 02816	City COVENTRY	State RI	Zip 02816
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 ROBERT I. ELDRED			Director Name DAN SHEA		
Street Address 562 PLAINFIELD PIKE			Street Address 55 TRELIS DRIVE		
City GREENE	State RI	Zip 02827	City WEST WARWICK	State RI	Zip 02893
Director Name HAROLD L. TRAFFORD, JR.			Director Name MAUREEN K. JENDZEJEC		
Street Address 15 CENTRE STREET			Street Address 276 ROBBINS DRIVE		
City COVENTRY	State RI	Zip 02827	City COVENTRY	State RI	Zip 02816
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 ROBERT I. ELDRED				Date 06/12/20	
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

Non-Profit Corporation Annual Report 2020

Attachment
SEVEN FARMS, INC.

Corporate ID # 127038

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BY

[Handwritten signature]

Additional Names and Addresses of the Directors:

1. R. DAVID JERVIS
300 ABBOTTS CROSSING ROAD
COVENTRY, R.I. 02816