



**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. 138792  
2. Name of Corporation 75 Western Industrial Drive Condominium Association, Inc.  
3. State of Incorporation RHODE ISLAND  
4. Corporate address in Rhode Island - Street Address 88 Alpine Estates Drive  
City Cranston Zip 02921  
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 ACT THE UNIT OWNER'S ASSOCIATION FOR THE 75 WESTERN INDUSTRIAL DRIVE CONDOMINIUM, CRANSTON, RI

7. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT)  FILL IN SPACES BEFORE USING ATTACHMENTS

President Name Vincent Di Nofrio Street Address 1710 Plainfield Pike City Cranston State RI Zip 02920	Vice President Name James Hague Street Address 34 Howard Ave. City Hope State RI Zip 02831
Secretary Name Ellen Carbone Street Address 88 Alpine Estates Drive City Cranston State RI Zip 02921	Treasurer Name Paul Carbone Street Address 88 Alpine Estates DR. City Cranston State RI Zip 02921

8. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT)  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 Vincent Di Nofrio Street Address see above City State Zip	Director Name James Hague Street Address see above City State Zip
Director Name Ellen Carbone Street Address see above City State Zip	Director Name Paul Carbone Street Address see above 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 Robert D. Murray, Esq.  
Address 21 Garden City Dr.  
City Cranston Zip 02920

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



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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 Ellen Carbone Date 4-12-06  
Print or Type Name of Officer ELLEN CARBONE  
Title of Officer SECRETARY