State of Rhode Island and Providence Plantations

Department of State - Business Services Division

FILED

FEB 16 2021

BY 2363

Annual Report for the year: 2021

Corporation

→ Filing period: January 1 - March 1
→ Filing Fee: $50.00
→ Penalty: Additional $25.00 fee if form is not filed by April 1.

1. Entity ID Number	2. Exact name of the Corporation		
0000013712	Naincook Community Association Inc		
3. Principal Office Address: 91 Main St Suite 118	City: Warren	State: RI	Zip: 02885
4. NAICS Code: 811111	6. Brief description of the character of business conducted in Rhode Island: Home Owners Association		
5. State of Incorporation: RI			

7. List ALL officers (names and addresses) — Check the box to indicate an attachment ☐

President Name: J. Terrence Murray			Vice-President Name		
Street Address: 33 Peaked Rock Lane			Street Address		
City: Narragansett	State: RI	Zip: 02882	City	State	Zip
Secretary Name: Paula McNamara			Treasurer Name		
Street Address: 91 Main St Suite 118			Street Address		
City: Warren	State: RI	Zip: 02885	City	State	Zip

8. List ALL directors (names and addresses) — Check the box to indicate an attachment ☐

Director Name: none			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip

9. Shares Authorized	10. Shares Issued — Check the box to indicate an attachment ☐		
This information is currently of record in the Department of State.	NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
Changes require an additional filing.	100	Common	1.00

11. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

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.

Name of Authorized Representative	Date
Paula McNamara	2/10/21

Signature of Authorized Representative: Paula McNamara

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov