



**State of Rhode Island
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: 2021

1. Corporate ID No. 000030133

2. Name of Corporation Tockwotten Cove Property Owners Association, Incorporated.

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



813990

4. Principal Office Address

No. and Street: PO BOX 1122

City or Town: CHARLESTOWN

State: RI

Zip: 02813

Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street:

City or Town: State: Zip: Country:

5. Brief Description of the Character of the Affairs Conducted in Rhode Island

THE ENHANCEMENT AND PROTECTION OF PROPERTIES, ROAD MAINTENANCE AND
SOCIABILITY

6. Names and Addresses of the Officers and Directors:

All Directors and Officers must be listed individually. The number of DIRECTORS of a Rhode Island Corporation shall not be less than 3.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
TREASURER	DEB BERGGREN	32 HAZEN ST. CHARLESTOWN, RI 02813 USA
SECRETARY	SHERRY DRUDE	71 ESSEX DR. CHARLESTOWN, RI 02813 USA
VICE PRESIDENT	TRACY TITUS	62 HAZEN ST. CHARLESTOWN, RI 02813 USA
DIRECTOR	TRACY TITUS	62 HAZEN ST. CHARLESTOWN, RI 02813 USA
PRESIDENT	CHRIS JOHNSON	PO BOX 479 CHARLESTOWN, RI 02813 USA
DIRECTOR	CHRIS JOHNSON	39 HAZEN ST. CHARLESTOWN, RI 02813 USA
VICE PRESIDENT	MATT LEPARD	5 EAST OVERLOOK TERRACE CHARLESTOWN, RI 02813 USA
DIRECTOR	MATT LEPARD	5 EAST OVERLOOK TERRACE CHARLESTOWN, RI 02813 USA
DIRECTOR	DON RICHARDS	69 HAZEN ST. CHARLESTOWN, RI 02813 USA

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

RAY KEOUGH 40 POJAC POINT ROAD NORTH KINGSTOWN , RI 02852

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

Signed this 8 Day of June, 2021 at 10:12:48 AM 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 CHRIS JOHNSON
Signature of Authorized Person

Form No. 631
Revised 09/07