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. 000067624

2. Name of Corporation Boulevard Medical Office Condominium Association

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

621999

4. Principal Office Address

No. and Street: 111 BREWSTER STREET
City or Town: PAWTUCKET State: RI Zip: 02860 Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street: 888 EDDY STREET

City or Town: PROVIDENCE State: RI Zip: 02905 Country: UNI

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

THE MANAGEMENT, OPERATION AND MAINTENANCE OF BOULEVARD MEDICAL OFFICE CONDOMINIUMS.

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	STEPHEN BURKE	345 BLACKSTONE BOULEVARD PROVIDENCE, RI 02906 USA
SECRETARY	ROBERT PRITCHARD	528 NORTH MAIN STREET PROVIDENCE, R 02904 USA
VICE PRESIDENT	ROBERT PRITCHARD	528 NORTH MAIN STREET PROVIDENCE, RI 02904 USA
PRESIDENT	MARK YERRICK	888 EDDY STREET PROVIDENCE, RI 02905 USA
DIRECTOR	MARK YERRICK	888 EDDY STREET PROVIDENCE, RI 02905 USA
DIRECTOR	JOYCE COPPOLA, M.D.	174 ARMISTICE BOULEVARD PAWTUCKET, RI 02860 USA
DIRECTOR	ROBERT PRITCHARD	528 NORTH MAIN STREET PROVIDENCE, RI 02904 USA
DIRECTOR	TODD SPENCER	528 NORTH MAIN STREET PROVIDENCE, RI 02904 USA
DIRECTOR	ROBERT CRAUSMAN M.D.	528 NEWTON STREET FALL RIVER, MA 02721 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

ASHLEY TAYLOR 45 WILLARD AVENUE PROVIDENCE , RI 02905

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

Signed this 11 Day of June, 2021 at 2:27:19 PM 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 MARK YERRICK
Signature of Authorized Person

Form No. 631
Revised 09/07