



**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.** 000045604

**2. Name of Corporation** Harbor Houses Condominium Association, Inc.

**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

**4. Principal Office Address**

No. and Street: 26 VALLEY ROAD, STE. 203

City or Town: MIDDLETOWN

State: RI

Zip: 02842

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**

ADMINISTRATION, REGULATION, USE, OPERATION, MANAGEMENT, OCCUPATION  
AND MAINTENANCE OF HARBOR HOUSE WATERFRONT CONDOMINIUM

**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.**

| <b>Title</b>   | <b>Individual Name</b><br>First, Middle, Last, Suffix | <b>Address</b><br>Address, City or Town, State, Zip Code, Country |
|----------------|-------------------------------------------------------|-------------------------------------------------------------------|
| PRESIDENT      | BENNIE SISTO                                          | 101 PLAIN ST. STE. 100<br>PROVIDENCE, RI 02903 USA                |
| TREASURER      | BENNIE SISTO                                          | 101 PLAIN ST STE. 100<br>PROVIDENCE, RI 02903 USA                 |
| SECRETARY      | BENNIE SISTO                                          | 101 PLAIN ST STE 100<br>PROVIDENCE, RI 02903 USA                  |
| VICE PRESIDENT | ALBERT SCHOFIELD                                      | 16 DEFENDERS ROW<br>NEWPORT, RI 02840 USA                         |
| DIRECTOR       | ALBERT SCHOFIELD                                      | 16 DEFENDERS ROW<br>NEWPORT, RI 02840 USA                         |
| DIRECTOR       | BENNIE SISTO                                          | 101 PLAIN ST. STE. 100<br>PROVIDENCE, RI 02903 USA                |
| DIRECTOR       | CHRISTINA BILL                                        | 10 DEFENDERS ROW<br>NEWPORT, RI 02840 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**

BENNIE SISTO PREMIER PROPERTY MANAGEMENT 26 VALLEY RD STE 203 MIDDLETOWN , RI  
02842

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

**Signed this 17 Day of June, 2021 at 10:52:24 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 KATHLEEN J. TOBAK  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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