



**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.** 001705209

**2. Name of Corporation** HARBOR VIEW HOMEOWNERS 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

**4. Principal Office Address**

No. and Street: 133 OLD TOWER HILL RD. STE 1

City or Town: WAKEFIELD

State: RI Zip: 02879 Country: USA

**5. Foreign Corporation. Enter Principal Office Address**

No. and Street: 74 KETTLE POND DR.

City or Town: WAKEFIELD State: RI Zip: 02879 Country: UNI

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

THE CORPORATION DOES NOT CONTEMPLATE PECUNIARY GAIN OR BENEFIT, DIRECT OR INDIRECT, TO ITS MEMBERS. IN WAY OF EXPLANATION AND NOT OF LIMITATION, THE PURPOSES FOR WHICH IT IS FORMED ARE:

(A) TO BE AND CONSTITUTE THE ASSOCIATION TO WHICH REFERENCE IS MADE IN THE "DECLARATION OF COVENANTS, CONDITIONS, RESTRICTIONS, CHARGES AND LIENS IMPOSED UPON HARBOR VIEW" AS MAY NOW EXIST AND AS MIGHT HAVE

ALREADY OR MAY HEREAFTER BE AMENDED, (HEREINAFTER REFERRED TO AS THE

“DECLARATION”), ESTABLISHING A PLAN OF DEVELOPMENT AND TO BE FILED IN THE LAND EVIDENCE RECORDS OF THE TOWN OF NORTH KINGSTOWN, COUNTY OF WASHINGTON, STATE OF RHODE ISLAND, TO PERFORM ALL OBLIGATIONS AND DUTIES

OF THE ASSOCIATION, AND TO EXERCISE ALL RIGHTS AND POWERS OF THE ASSOCIATION, AS SPECIFIED THEREIN, IN THE BY-LAWS, AND AS PROVIDED BY LAW; AND

(B) TO PROVIDE AN ENTITY FOR THE FURTHERANCE OF THE INTERESTS OF THE OWNERS IN THE DEVELOPMENT.

IN FURTHERANCE OF ITS PURPOSES, THE CORPORATION SHALL HAVE THE FOLLOWING POWERS, WHICH, UNLESS INDICATED OTHERWISE BY THE DECLARATION OR

BY-LAWS, MAY BE EXERCISED BY THE BOARD OF DIRECTORS:

(A) ALL OF THE POWERS CONFERRED UPON NONPROFIT CORPORATIONS BY COMMON

LAW AND THE STATUTES OF THE STATE OF RHODE ISLAND IN EFFECT FROM TIME TO

TIME;

(B) ALL OF THE POWERS NECESSARY OR DESIRABLE TO PERFORM THE OBLIGATIONS

AND DUTIES AND TO EXERCISE THE RIGHTS AND POWERS SET OUT IN THE ARTICLES OF INCORPORATION, THE BY-LAWS, OR THE DECLARATION, INCLUDING, WITHOUT LIMITATION, THE FOLLOWING:

(I) TO CARE FOR, MAINTAIN AND REPAIR SAID LOTS DESIGNATED AS “OPEN SPACE A”, “OPEN SPACE B”, “OPEN SPACE C”, “OPEN SPACE D” AND “OPEN SPACE E” OR ANY PART THEREOF.

(II) TO PROVIDE FOR THE PAYMENT OF TAXES AND ASSESSMENTS, IF ANY, THAT MAY BE LEVIED BY ANY GOVERNMENTAL AUTHORITY UPON SAID LOTS DESIGNATED AS “OPEN SPACE A”, “OPEN SPACE B”, “OPEN SPACE C”, “OPEN SPACE D” AND “OPEN SPACE E”, OR ANY PART THEREOF.

(III) TO ENFORCE CHARGES, EASEMENTS, RESTRICTIONS, CONDITIONS, COVENANTS, AND SERVITUDES EXISTING UPON AND CREATED FOR THE BENEFIT OF SAID LOT DESIGNATED AS “OPEN SPACE A”, “OPEN SPACE B”, “OPEN SPACE C”, “OPEN SPACE D” AND “OPEN SPACE E”, TO PAY ALL EXPENSES INCIDENTAL THEREOF; TO ENFORCE THE DECISIONS AND RULINGS OF THE ORGANIZATION; AND

TO

PAY ALL EXPENSES IN CONNECTION THEREWITH.

(IV) TO PROVIDE FOR THE MAINTENANCE OF STREET LIGHTS, PARKS, RECREATIONAL FACILITIES AND OTHER COMMUNITY FEATURES ON SAID LOT DESIGNATED AS “OPEN SPACE A”, “OPEN SPACE B”, “OPEN SPACE C”, “OPEN SPACE D” AND “OPEN SPACE E”.

(V) TO CARE FOR, MAINTAIN AND REPAIR STORMWATER BASIN 1, STORMWATER BASIN 2, BIO RETENTION BASIN 1, BIO RETENTION BASIN 2, BIO RETENTION BASIN 3, BIO RETENTION BASIN 4 AND BIO RETENTION BASIN 5 IN COMPLIANCE WITH DETAIL SHEETS 1 THROUGH 5, INCLUSIVE, OF THE HARBOR VIEW

PLAN, AND THE PROVISIONS OF THE OPERATION & MAINTENANCE GUIDELINES FOR LOW IMPACT DEVELOPMENT BEST MANAGEMENT PRACTICES FOR HARBOR VIEW, AND THE

EXISTING GRASSED DRIVEWAY SHOWN ON THE HARBOR VIEW PLAN, INCLUDING THE

DUTY TO KEEP SAID DRAINAGE AREAS AND GRASSED DRIVEWAY CLEAR OF BRUSH AND

TREES.

(VI) TO MONITOR COMPLIANCE WITH THE DRIVEWAY SEALANT AND LAWN, GARDEN AND LANDSCAPING MANAGEMENT PROVISIONS OF DECLARANT'S DRAINAGE

REPORT AS APPROVED AND ACCEPTED BY THE TOWN OF NORTH KINGSTOWN. IN THE

EVENT OF A VIOLATION OF SAID PROVISIONS THAT CONTINUES AFTER THE ASSOCIATION HAS NOTIFIED THE VIOLATING OWNER IN WRITING, THE ASSOCIATION

SHALL NOTIFY THE TOWN OF NORTH KINGSTOWN OF SAID VIOLATION, AND THE TOWN

OF NORTH KINGSTOWN SHALL HAVE THE RIGHT TO ENFORCE THE PROVISIONS THROUGH ITS ZONING OFFICIAL.

(VII) TO APPOINT SUCH COMMITTEE AS MAY BE NECESSARY TO, OR CONVENIENT IN, THE ORGANIZATION DISCHARGING THE DUTIES ENTRUSTED TO IT.

(VIII) TO LEVY AN ANNUAL CHARGE UPON THE MEMBERS OF THE ORGANIZATION AND TO SUE TO COLLECT ANY OF SUCH CHARGES AS ARE NOT PAID. SAID ANNUAL CHARGE SHALL BE FIXED AT AN EQUAL AMOUNT FOR EACH PLATTED NUMBERED LOT

AND SHALL BE FIXED AT AN ANNUAL MEETING OF THE ORGANIZATION.

(IX) TO EXPEND THE MONEYS COLLECTED BY THE ORGANIZATION FROM ASSESSMENTS OR CHARGES, AND OTHER SUMS RECEIVED BY THE ORGANIZATION, FOR

THE PAYMENT AND DISCHARGE OF ALL PROPER COSTS, EXPENSES, AND OBLIGATIONS

INCURRED BY THE ORGANIZATION IN CARRYING OUT ALL OR ANY OF THE PURPOSES

FOR WHICH THE ORGANIZATION IS FORMED.

(X) TO DO ALL THINGS NECESSARY AND PROPER TO ACCOMPLISH THE FOREGOING PURPOSES.

**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> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
PRESIDENT	ANTHONY J. FIORE	23 WESQUAGE DR. NARRAGANSETT, RI 02882 USA
TREASURER	LISA FIORE	74 KETTLE POND DR. WAKEFIELD, RI 02879 USA
SECRETARY	LISA FIORE	74 KETTLE POND DR. WAKEFIELD, RI 02879 USA
DIRECTOR	ANTHONY J. FIORE	23 WESQUAGE DR. NARRAGANSETT, RI 02882 USA
VICE PRESIDENT	NICHOLAS FINAMORE	74 KETTLE POND DR. WAKEFIELD, RI 02879 USA
INCORPORATOR	STEPHEN B. KENYON	133 OLD TOWER HILL RD, STE. 1 WAKEFIELD, RI 02879 USA
DIRECTOR	LISA FIORE	74 KETTLE POND DRIVE WAKEFIELD, RI 02879 USA
DIRECTOR	NICHOLAS FINAMORE	74 KETTLE POND DRIVE WAKEFIELD, RI 02879 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**

STEPHEN B. KENYON 133 OLD TOWER HILL ROAD SUITE 1 WAKEFIELD , RI 02879

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

**Signed this 18 Day of June, 2021 at 4:41:38 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 ANTHONY J. FIORE  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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