



**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. 000688835

2. Name of Corporation 903 Condominium Owner's 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: 903 PROVIDENCE PLACE

City or Town: PROVIDENCE

State: RI

Zip: 02903

Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street: 903 PROVIDENCE PLACE

City or Town: PROVIDENCE

State: RI

Zip: 02903

Country: USA

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

THE OWNERSHIP, OPERATION, MAINTENANCE AND REPAIR OF THE 903 CONDOMINIUM ASSOCAITION CONDOMINIUM AND ALL RESPONSIBILITIES SET FORTH IN THE RHODE ISLAND CONDOMINIUM ACT; THE CORPORATION SHALL HAVE ALL THE REST OF THE POWERS GRANTED TO CORPORATIONS BY THE LAWS OF THE STATE OF RHODE ISLAND, PROVIDED THAT NO SUCH POWER SHALL INCLUDE ANY ACTIVITY INCONSISTENT WITH THE BUSINESS CORPORATION LAW OR THE GENERAL LAWS OF SAID STATE OF RHODE ISLAND.

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
PRESIDENT	STEPHEN CHAPMAN	100 GALEN STREET SUITE 301 WATERTOWN, MA 02472 USA
TREASURER	KEVIN HENRY	903 PROVIDENCE PLACE UNIT 258 PROVIDENCE, RI 02903 USA
SECRETARY	DAVID ROBINSON	903 PROVIDENCE PLACE UNIT 155 PROVIDENCE, RI 02903 USA
DIRECTOR	SCOTT RINGLAND	903 PROVIDENCE PLACE UNIT 147 PROVIDENCE , RI 02903 USA
DIRECTOR	ROBERT SIMONDS	100 GALEN ST WATERTOWN, MA 02472 USA
DIRECTOR	WAYNE LOPEZ	45 PROVINCE ST BOSTON, MA 02108 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

WALTER PASTOR 903 PROVIDENCE PLACE MANAGEMENT OFFICE PROVIDENCE , RI 02903

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

Signed this 30 Day of June, 2021 at 4:00:48 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 WALTER PASTOR
Signature of Authorized Person

Form No. 631
Revised 09/07

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