

**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.** 000043759**2. Name of Corporation** DALE HILL 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

624229**4. Principal Office Address**No. and Street: PO BOX 8971City or Town: CRANSTONState: RIZip: 02920Country: 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 IslandCONDOMINIUM ASSOCIATION**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	DIANA SININA	35 C DALE AVENUE JOHNSTON, RI 02919 USA
TREASURER	JAMES GARCIA	37C DALE AVENUE JOHNSTON, RI 02919 USA
DIRECTOR	GINA DEBARTOLO	78 GINGER TRAIL COVENTRY, RI 02816 USA
DIRECTOR	JAMES GARCIA	37 C DALE AVENEUE JOHNSTON, RI 02919 USA
DIRECTOR	CHRISTINA KIDD	35D DALE AVENUE JOHNSTON, RI 02919 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

PROPERTY MANAGEMENT PROFESSIONALS, INC. 172 STONY ACRE DRIVE P.O. BOX 8971
CRANSTON , RI 02920

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

Signed this 28 Day of July, 2021 at 7:53:42 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 SHERRY FERREIRACADDEN
Signature of Authorized Person

Form No. 631
Revised 09/07