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. 000073959

2. Name of Corporation Fairlawn Terrace 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

813990

4. Principal Office Address

No. and Street: PO BOX 324
City or Town: LINCOLN State: RI Zip: 02865 Country: USA

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

TO OPERATE AND ADMINSTER THE CONDOMINIUM COMPLEX.

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
SECRETARY	MICHAEL ROCHA	58 POWER ROAD PAWTUCKET, RI 02860 USA
AT LARGE	JUDY KERR	186 ARGOL ST

		PAWTUCKET, RI 02860 USA
DIRECTOR	MICHEL ROBERT ROCHELEAU	320 NORWOOD AVE WARWICK, RI 02888 USA
DIRECTOR	CAROL JOAQUIM	54 POWER ROAD PAWTUCKET, RI 02860 USA
DIRECTOR	LORRAINE M ROCHELEAU	174 ARGOL ST, PAWTUCKET, RI 02860 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

FIRST CHOICE PROPERTY MANAGEMENT INC. 174 ARGOL STREET PAWTUCKET , RI 02860

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

Signed this 23 Day of September, 2021 at 4:33:03 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 MICHEL R ROCHELEAU
Signature of Authorized Person

Form No. 631
Revised 09/07