



**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: February 1 - May 1

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: 2022

1. Corporate ID No. 000027927

2. Name of Corporation Buck Hill 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: 10 STAGHEAD DRIVE
City or Town: PASCOAG State: RI Zip: 02859 Country: USA

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

HOMEOWNERS 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	MITCHELL PARKHURST	78 STAGHEAD DR PASCOAG, RI 02859 US
TREASURER	LISA BRISSETTE	222 STAGHEAD DR

		PASCOAG, RI 02859 US
VICE PRESIDENT	ROBERT BRISETTE	222 STAGHEAD DR PASCOAG, RI 02859 USA
DIRECTOR	STACY HAMPSON	40 DOE CROSSING PASCOAG, RI 02859 USA
SECRETARY	THOMAS SMITH	10 STAGHEAD DR PASCOAG, RI 02859 USA
DIRECTOR	CORINNE VAZQUEZ	34 STAGHEAD DR PASCAOG, RI 02859 USA
DIRECTOR	LENNOX BEAUMONT	35 DOE CROSSING DR PASCOAG, RI 02859 USA
DIRECTOR	AL ESTELLA	253 STAGHEAD DR PASCOAG, RI 02859 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**

THOMAS SMITH 10 STAGHEAD DRIVE PASCOAG , RI 02859

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

Signed this 13 Day of May, 2022 at 9:22:12 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 THOMAS SMITH
Signature of Authorized Person

Form No. 631
Revised 09/07

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