



**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. 001690486

2. Name of Corporation Beaver River Valley Community 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



813312

4. Principal Office Address

No. and Street: 106 LEWISTON AVENUE

City or Town: RICHMOND

State: RI Zip: 02892 Country: USA

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

FOR THE PURPOSE OF MAINTAINING A COMMUNITY ASSOCIATION FOR THE AREA OF RICHMOND, RHODE ISLAND, KNOWN AS THE HISTORIC BEAVER RIVER VALLEY AGRICULTURAL DISTRICT, AND ITS ENVIRONS; FOR EDUCATING THE PUBLIC AS TO THE MEANS OF PRESERVATION AND MAINTENANCE OF THE RURAL NATURE AND NATURAL AND HISTORIC RESOURCES OF THIS DISTRICT; FOR PROTECTING ITS HISTORIC LANDSCAPES, STRUCTURES, FARMS AND OPEN SPACE, INCLUDING ITS SCENIC VISTAS, VIEWSHEDS, VIEW CORRIDORS, AND ROADWAYS; FOR PROVIDING A MEANS BY WHICH RESIDENTS OF THE DISTRICT MAY BAND TOGETHER TO ACHIEVE COMMON GOALS; AND FOR FOSTERING A POSITIVE PUBLIC ATTITUDE TOWARD THE AREA AND ITS FUTURE.

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	WALTER PRESCOTT	129 NORTH ROAD SHANNOCK, RI 02875 USA
DIRECTOR	WALTER PRESCOTT	129 NORTH ROAD SHANNOCK, RI 02875 USA
DIRECTOR	JOHN M. PEIXINHO	106 LEWISTON AVENUE RICHMOND, RI 02892 USA
DIRECTOR	DAVID RUSSO	126 NORTH ROAD SHANNOCK, RI 02875 USA
DIRECTOR	KIM ROBERTSON	190 SHANNOCK HILL ROAD SHANNOCK, RI 02875 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

JOHN PEIXINHO 106 LEWISTON AVENUE RICHMOND , RI 02892

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

Signed this 11 Day of July, 2022 at 11:20:36 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 JOHN PEIXINHO
Signature of Authorized Person

Form No. 631
Revised 09/07