	State of Rhode Office of the Secreta		Fee: \$20.00
	Division Of Busines	•	
	148 W. River S		
	Providence RI 029	04-2615	
1636	(401) 222-30	40	
Non-Profit Corporation Annual Report Filing Period: February 1 - May	1		
In accordance with R.I.G.L. 7-6 annual report within the time pro penalty fee of \$25.00.			
ANNUAL REPORT YEAR: 2023	3		
1. Corporate ID No. <u>00015</u>	2321		
2. Name of Corporation <u>Avor</u>	Idale Homeowners Associat	tion	
3. State of Incorporation			
State: <u>RI</u>			
	ARTICLE III		
Using the dropdown labeled Na primary type of activity in whic populate a NAICS Code based box on the right. For further as	h your entity engages. The l	box to the right o the NAICS Code	f the dropdown will is known, enter it into the
NAICS Code			
<u>813990</u>			
4. Principal Office Address			
No. and Street: PO B	OX 1152		
City or Town: WEST		Zip: <u>02891</u>	Country: <u>USA</u>
5. Brief Description of the Cha	aracter of the Affairs Condu	icted in Rhode Is	land
TO PROTECT THE ENVIR	ONMENT AND PROMOT	TE THE GENER	RAL WELFARE OF
THE VILLAGE OF AVOND	ALE		
6. Names and Addresses of t	he Officers and Directors:		
All Directors and Officers mu Island Corporation shall not b		e number of DIR	ECTORS of a Rhode

	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country	
PRESIDENT	JOHN TOWNSEND	26 AVONDALE ROAD WESTERLY, RI 02891 USA	
TREASURER	ROBERT A KIEL	3 CHAMPLIN DRIVE WESTERLY, RI 02891 USA	
DIRECTOR	TOM OCONNOR	37 AVONDALE ROAD WESTERLY, RI 02891 USA	
VICE PRESIDENT	KIRK MATERNE	13 AVONDALE ROAD WESTERLY, RI 02891 USA	
DIRECTOR	DIANE BRINK	6 SHEPHERDS RUN WESTERLY, RI 02891 USA	
DIRECTOR	FRED SCULCO	117 AVONDALE ROAD WESTERLY, RI 02891 USA	
DIRECTOR	TRIPP RIDDER	17 CHAMPLIN DRIVE WESTERLY, RI 02891 USA	
DIRECTOR	CAROL MILLER	116 AVONDALE ROAD WESTERLY, RI 02891 USA	
DIRECTOR	CHANTAL CURTIS	56 AVONDALE ROAD WESTERLY, RI 02891 USA	
DIRECTOR	TALLEY ACKERMAN	36 AVONDALE ROAD WESTERLY, RI 02891 USA	
DIRECTOR	JOAN GORMAN	112 AVONDALE ROAD WESTERLY, RI 02891 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

GAIL BONNER, ESQ. 21 DEL BONIS DRIVE 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 30 Day of January, 2023 at 10:53:03 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 ROBERT A. KIEL

Signature of Authorized Person

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