



State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2023
Non-Profit Corporation

- Filing period: February 1 - May 1
- Filing Fee: \$20.00
- Penalty: Additional \$25.00 fee if form is not filed by May 31.

FILED
FEB 06 2023
BY 1415
ES

1. Entity ID Number 000027479		2. Exact name of the Corporation FOX RUN CONDOMINIUM ASSOCIATION, INC.			
3. State of Incorporation RI		5. Brief description of the character of business conducted in Rhode Island <i>Condominium association</i>			
4. NAICS Code 813910 Business Association <input type="checkbox"/>					
6. Principal Office Address 1341 WEST MAIN RD			City MIDDLETOWN	State RI	Zip 02842
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name JANE COURSON			Vice-President Name THERESA YOUNG		
Street Address 4 FOX RUN ROAD			Street Address 5 FOX RUN ROAD		
City PORTSMOUTH	State RI	Zip 02871	City PORTSMOUTH	State RI	Zip 02871
Secretary Name NANCY KING			Treasurer Name		
Street Address 2 FOX RUN ROAD			Street Address		
City PORTSMOUTH	State RI	Zip 02871	City	State	Zip
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment <input type="checkbox"/>					
Director Name ELIZABETH ALMEIDA			Director Name JANE COURSN		
Street Address 10 FOX RUN ROAD			Street Address 4 FOX RUN ROAD		
City PORTSMOUTH	State RI	Zip 02871	City PORTSMOUTH	State RI	Zip 02871
Director Name NANCY KING			Director Name		
Street Address 2 FOX RUN ROAD			Street Address		
City PORTSMOUTH	State RI	Zip 02871	City	State	Zip
9. The Registered Agent information of record with the RI Department of State is accurate. Changes require filing Form 641.					
Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.					
<i>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee</i>					
Name of Officer/Authorized Representative Ana Lake (Coastal Property Management agent of Fox Run Condo)					Date 1/30/2023
Signature of Officer/Authorized Representative <i>Ana Lake</i>					

MAIL TO:
 Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040
 Website: www.sos.ri.gov