RI SOS Filing Number: 202327496030 Date: 3/16/2023 12:15:00 PM



## 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: 2023** 

- 1. Corporate ID No. 000513160
- 2. Name of Corporation COMPTON HIGHLANDS LOT OWNERS 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

813990

#### 4. Principal Office Address

No. and Street: 7 HIGHLAND AVENUE

City or Town: <u>LITTLE COMPTON</u> State: <u>RI</u> Zip: <u>02837</u> Country: <u>USA</u>

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

### ORGANIZE HOME AND LOT OWNERS

#### 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	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country

DIRECTOR	SUSAN TULLSON MRS	18 HIGHLAND AVENUE LITTLE COMPTON, RI 02837 US
DIRECTOR	DENNIS BERNARD MR	7 HIGHLAND AVENUE LITTLE COMPTON, RI 02837 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

JEFFREY R. KENYON 11 HIGHLAND AVENUE LITTLE COMPTON, RI 02837

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

**Signed this 16 Day of March, 2023 at 12:16:14 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 <u>JEFFREY R. KENYON</u> Signature of Authorized Person

Form No. 631 Revised 09/07

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