Off	State of Rhode Isla ice of the Secretary of		Fee: \$20.00	
	Division Of Business Ser			
	148 W. River Street			
	Providence RI 02904-2	615		
1636	(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. 000185111				
2. Name of Corporation Saylesville Common Condominium Association, Inc.				
3. State of Incorporation				
State: <u>RI</u>				
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 <u>click here.</u>				
NAICS Code				
<u>813910</u>				
4. Principal Office Address				
No. and Street: <u>10 BRANCH AV</u>	VENUE			
City or Town: <u>LINCOLN</u>	State: <u>RI</u>	Zip: <u>02865</u>	Country: <u>USA</u>	
5. Brief Description of the Character of the Affairs Conducted in Rhode Island				
THE ADMINISTRATION, MAINT	'ENANCE, REPAIR. R	EPLACEMEN	Γ, IMPROVEMENT	
THE ADMINISTRATION, MAINT AND OPERATION OF THE SAYL				
	ESVILLE COMMON (
AND OPERATION OF THE SAYL	ESVILLE COMMON (cers and Directors: sted individually. The nu	CONDOMINIU	<u>M IN LINCOLN, RI</u>	

	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
PRESIDENT	EDWARD K SLINEY	10 BRANCH AVENUE LINCOLN, RI 02865 USA
DIRECTOR	TYLER SLINEY	EXETER ROAD NORTH KINGSTOWN, RI 02854 USA
DIRECTOR	LINDA GAIL SLINEY	10 BRANCH AVE LINCOLN, RI 02865 USA
DIRECTOR	ELIZABETH KAY REIL	1 TIMBERLAND DR. LINCOLN, RI 02865 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

EDWARD K. SLINEY 10 BRANCH AVENUE LINCOLN , RI 02865

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

Signed this 23 Day of March, 2023 at 12:29:26 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 EDWARD SLINEY

Signature of Authorized Person

Form No. 631 Revised 09/07

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