

**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.** 000798749**2. Name of Corporation** ARNOLDA EAST 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: P.O. BOX 1346City or Town: CHARLESTOWN State: RI Zip: 02813 Country: USA**5. Brief Description of the Character of the Affairs Conducted in Rhode Island**TO OPERATE AND MAINTAIN A HOMEOWNERS ASSOCIATION.**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
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PRESIDENT	HAROLD KISNER	WESTWAY CHARLESTOWN, RI 02813 USA
TREASURER	CHRISTOPHER J FOX	41 GRAYS POINT RD CHARLESTOWN, RI 02813 USA
SECRETARY	JENNIFER GRIFFIN	WEST WAY CHARLESTOWN, RI 02813 USA
VICE PRESIDENT	STANLEY BARAN	12 MILLBROOK CT CHARLESTOWN, RI 02813 USA
DIRECTOR	JENNIFER HODSHON	11 EAST ARNOLDA ROAD CHARLESTOWN, RI 02813 USA
DIRECTOR	JENNIFER DEMIRS	92 EAST ARNOLDA DR CHARLESTOWN, RI 02813 USA
DIRECTOR	LIZBETH NAUTA	GREYS POINT RD CHARLESTOWN, RI 02813 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**

ARTHUR HASKINS 11 MILLBROOK CT. CHARLESTOWN , RI 02813

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

**Signed this 4 Day of April, 2023 at 11:44:53 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 CHRISTOPHER FOX  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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