



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

RECEIVED  
R.I. DEPT. OF STATE  
BUS SVCS DIV  
MAY 03 2023  
2023 MAY 22 PM 2:26

1 Entity ID Number <b>000679127</b>		2 Exact name of the Corporation <b>Prospect Place Condominium Association</b>	
3 State of Incorporation <b>Rhode Island</b>		5 Brief description of the character of business conducted in Rhode Island <b>Administrative operation, management, maintenance, preservation control, Condo Association</b>	
4 NAICS Code <b>813990</b>			
6 Principal Office Address <b>40 Prospect Ave.</b>		City <b>Narragansett</b>	State <b>RI</b>
		Zip <b>02882</b>	
7 List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment</span>			
President Name <b>Karen Varney</b>		Vice-President Name <b>Karen Gorter</b>	
Street Address <b>40 Prospect Ave Unit B-3</b>		Street Address <b>40 Prospect Ave Unit B-2</b>	
City <b>Narragansett</b>	State <b>RI</b>	City <b>Narragansett</b>	State <b>RI</b>
Zip <b>02882</b>		Zip <b>02882</b>	
Secretary Name <b>Elizabeth Morin</b>		Treasurer Name <b>Arthur Andolfo</b>	
Street Address <b>40 Prospect Ave Unit A-4</b>		Street Address <b>23 Bellwood Rd</b>	
City <b>Narragansett</b>	State <b>RI</b>	City <b>Cranston</b>	State <b>RI</b>
Zip <b>02882</b>		Zip <b>02920</b>	
8 List ALL directors (names and addresses) RI Corporations <b>MUST</b> list at least <b>THREE</b> directors. <span style="float: right;">Check the box to indicate an attachment</span>			
Director Name <b>Karen Varney</b>		Director Name <b>Karen Gorter</b>	
Street Address <b>40 Prospect Ave B-3</b>		Street Address <b>40 Prospect Ave B-2</b>	
City <b>Narragansett</b>	State <b>RI</b>	City <b>Narragansett</b>	State <b>RI</b>
Zip <b>02882</b>		Zip <b>02882</b>	
Director Name <b>Arthur Andolfo</b>		Director Name	
Street Address <b>23 Bellwood Rd.</b>		Street Address	
City <b>Cranston</b>	State <b>RI</b>	City	State
Zip <b>02920</b>		Zip	
9 The Registered Agent information of record with the RI Department of State is accurate. Changes require filing Form 641			
<b>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.</b>			
This report must be signed by either the President, Vice President, Secretary Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee			
Name of Officer/Authorized Representative <b>Karen Varney</b>			Date <b>3/16/2023</b>
Signature of Officer/Authorized Representative <i>Karen Varney</i>			<b>FILED</b>

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

**FILED**  
**MAY 22 2023**  
BY 160  
**A.A. 2:26pm.**