RI SOS Filing Number: 202340654170 Date: 9/1/2023 9:22:00 AM



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 - ENTER THE CURRENT FILING YEAR 2023: 2023

- 1. Corporate ID No. 001709190
- 2. Name of Corporation Slocum Heights Condominium
- 3. State of Incorporation

State: RI

NAICS CODE

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>813990</u>

4. Principal Office Address

No. and Street: 786 OAKLAWN AVE.

CRANSTON,RI 02920

City or Town: <u>CRANSTON</u> State: <u>RI</u> Zip: <u>02920</u> Country: <u>USA</u>

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

CONDOMINIUM 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	Address
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	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
TREASURER	JOHN MASSENZIO	214 ALLEGRA LANE NORTH KINGSTOWN, RI 02852 USA
DIRECTOR	RICHARD PADIEN	186 ALLEGRA LN NORTH KINGSTOWN, RI 02852 USA
DIRECTOR	HEATHER WALL	230 ALLEGRA LANE NORTH KINGSTOWN, RI 02852 USA
DIRECTOR	JOHN MASSENZIO	214 ALLEGRA LANE NORTH KINGSTOWN, RI 02852 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

THOMAS COUCCI 76 WESTMINSTER STREET, SUITE 204 PROVIDENCE, RI 02903

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

Signed this 1 Day of September, 2023 at 9:22:34 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 **HEATHER HALL**

Signature of Authorized Person

Form No. 631 Revised 09/07

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