	State of Rhode Office of the Secret		Fee: \$20.00	
	Division Of Busines	s Services		
	148 W. River S			
1100	Providence RI 029			
1030	(401) 222-30	40		
Non-Profit Corporation				
Annual Report Filing Period: February 1 - Ma	y 1			
In accordance with R.I.G.L. 7- annual report within the time p	· · · · · · · · · · · · · · · · · · ·			
penalty fee of \$25.00.				
ANNUAL REPORT YEAR - EN	ITER THE CURRENT YEAR 2	024 : <u>2024</u>		
1. Corporate ID No. 001689389				
2. Name of Corporation Saltwood Farm Homeowners Association, Inc.				
3. State of Incorporation				
State: <u>RI</u>				
	NAICS CODE			
Using the dropdown labeled N primary type of activity in whi populate a NAICS Code base box on the right. For further a	ch your entity engages. The d on the chosen selection. If	box to the right of the the NAICS Code is k	e dropdown will	
NAICS Code				
<u>813990</u>				
4. Principal Office Address				
No. and Street: 135 BA	ILEY AVENUE			
	<u>LETOWN</u> State	:: <u>RI</u> Zip: <u>02842</u>	Country: <u>USA</u>	
5. Brief Description of the Character of the Affairs Conducted in Rhode Island				
TO PROMOTE GENERAL WELFARE OF THE RESIDENTS AND THE LOT OWNERS OF				
THE SALTWOOD FARM SUBDIVISION IN MIDDLETOWN RI				
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	Ado	Iress	
1				

	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
PRESIDENT	PETER GALLIPEAU	135 BAILEY AVE. MIDDLETOWN, RI 02842 USA
TREASURER	PETER GALLIPEAU	135 BAILEY AVE. MIDDLETOWN, RI 02842 USA
SECRETARY	KATHLEEN MARIE CONNELL	135 BAILEY AVE. MIDDLETOWN, RI 02842 USA
VICE PRESIDENT	KATHLEEN MARIE CONNELL	135 BAILEY AVE. MIDDLETOWN, RI 02842 USA
DIRECTOR	PETER GALLIPEAU	135 BAILEY AVE. MIDDLETOWN, RI 02842 USA
DIRECTOR	MARTIN WILLIAM GALLIPEAU	79 BRIDGE ST APT 1R SALEM, MA 01970-4191 USA
DIRECTOR	KATHLEEN MARIE CONNELL	135 BAILEY AVE. MIDDLETOWN, RI 02842 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

KATHLEEN M. CONNELL 135 BAILEY AVE. MIDDLETOWN , RI 02842

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

Signed this 29 Day of January, 2024 at 3:21:38 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>PETER GALLIPEAU</u> Signature of Authorized Person

Form No. 631 Revised 09/07

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