

REC'D RIDOS BSD
24 MAR 27 PM 1:13:55State of Rhode Island
Department of State - Business Services DivisionAnnual Report for the year: 2022
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.

1. Entity ID Number 000070309		2. Exact name of the Corporation WESTBOND ESTATES HOMEOWNERS ASSOCIATION INC	
3. State of Incorporation RI		5. Brief description of the character of business conducted in Rhode Island DOMESTIC NON-PROFIT HOMEOWNERS ASSOCIATION	
4. NAICS Code 813990			
6. Principal Office Address 59 ROLLINGWOOD DRIVE		City JOHNSTON	State RI
		Zip 02919	
7. List ALL officers (names and addresses). Check the box to indicate an attachment <input type="checkbox"/>			
President Name FRANK LOMBARDO		Vice-President Name	
Street Address 68 ROLLINGWOOD DRIVE		Street Address	
City JOHNSTON	State RI	Zip 02919	
Secretary Name		Treasurer Name	
Street Address		Street Address	
City	State	Zip	
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment <input type="checkbox"/>			
Director Name RICHARD E FISHPAW		Director Name ROBERT RUBUSSINI	
Street Address 59 ROLLINGWOOD DRIVE		Street Address 28 ROLLINGWOOD DR	
City JOHNSTON	State RI	Zip 02919	
Director Name FRANK LOMBARDO		Director Name	
Street Address 68 ROLLINGWOOD DR		Street Address	
City JOHNSTON	State RI	Zip 02919	
9. The Registered Agent information of record with the RI Department of State is accurate. Changes require filing Form 641.			
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.			
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 Neil Estep			Date 3/27/24
Signature of Officer/Authorized Representative			

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

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BY MAL 315

FORM 631- Revised 04/2023