

**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 YEAR 2024:** 2024**1. Corporate ID No.** 000031046**2. Name of Corporation** SEA LEA COLONY ASSOCIATES, INC.**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 [click here](#).

NAICS Code

813990**4. Principal Office Address**No. and Street: 20 5TH AVECity or Town: CHARLESTOWNState: RIZip: 02813Country: USA**5. Brief Description of the Character of the Affairs Conducted in Rhode Island**MAINTAIN ROADS AND COMMON PROPERTY**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

PRESIDENT	JOHN OMASTA	31 5TH AVENUE CHARLESTOWN, RI 02813 USA
TREASURER	JOHN HARRINGTON	20 5TH AVENUE CHARLESTOWN, RI 02813 USA
VICE PRESIDENT	JOANN GRIGOLI	9 5TH AVENUE CHARLESTOWN, RI 02813 USA
DIRECTOR	JOHN OMASTA	31 5TH AVENUE CHARLESTOWN, RI 02813 USA
DIRECTOR	JOANN GRIGLIO	9 5TH AVENUE CHARLESTOWN, RI 02813 USA
DIRECTOR	JOHN HARRINGTON	20 5TH AVENUE 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**

DAVID LANDRY 25 THIRD STREET 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 23 Day of April, 2024 at 4:46:12 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 JOHN HARRINGTON  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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