RI SOS Filing Number: 202453040750 Date: 4/26/2024 1:32:00 PM

State of Rhode Island .  Department of State - Business Services Division				REC '24 A		
Annual Report for the year:		HAPR S				
Non-Profit Corporation				RIDOS 85 26 FM1:25		
→ Filing period: February 1 - May 1 → Filing Fee: \$20.00				±1:		
→ Penalty: Additional \$25.00 fee if						
1. Entity ID Number 001732817	2. Exact name of the Corporation സ്സ The Residences at Hopkins Pond Condominium Association, Inc					
State of Incorporation	5. Brief description of the character of business conducted in Rhode Island					
Rhode Island	Condominium Association					
4. NAICS Code 813910						
6. Principal Office Address			City	State	Zip	
109 Julia Way			Johnston	RI	02919	
7. List ALL officers (names and addresses)				Check the box to indicate an attachment 🗹		
President Name Ralph Bubar			Vice-President Name Steven Pagliaro			
Street Address 105 Julia Way			Street Address 104 Julia Way			
<sup>City</sup> Johnston	State RI	<sup>Zip</sup> 02919	City Johnston	State RI	<sup>Zip</sup> 02919	
Secretary Name Ronald Popp			Treasurer Name Elizabeth Cole			
Street Address 112 Julia Way			Street Address 109 Julia Way			
<sup>City</sup> Johnston	State RI	<sup>Zip</sup> 02919	City Johnston	State RI	Zip 02919	
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors.  Check the box to indicate an attachment						
Director Name Ralph Bubar			Director Name Steven Pagliaro			
Street Address 105 Julia Way			Street Address 104 Julia Way			
<sup>City</sup> Johnston	State RI	<sup>Zip</sup> 02919	<sup>City</sup> Johnston	State RI	Zip 02919	
Director Name Ronald Popp			Director Name Elizabeth Cole			
Street Address 112 Julia Way			Street Address 109 Julia Way			
<sup>City</sup> Johnston	State RI	<sup>Zip</sup> 02919	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, duty Authorized Representative, Receiver or Trustee						
Name of Officer/Authorized Representative				Date		
Steven Pagliaro, Vice President Signature of Officer/Authorized Representative				04-25-24		
Soldinario di Office i Autiliorizadi Rapresentative			FILED			
MAIL TO: Division of Business Services			APR <b>26</b> 2024	1'2 n		
148 W. River Street, Providence, Rhode Island 02904-2615 Phone: (401) 222-3040				1:32		
Website: www.sos ri gov			BY K9488	FORM 631- Re	vised 12/2023	
			11.10			

Entity ID# 001732817
The Residences at Hopkins Pond Condominium Association, Inc.

Additional Officers: Ronald Ricci, Officer, Member at Large 119 Julia Way Johnston, RI 02919

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Additional Directors: Ronald Ricci 119 Julia Way Johnston, RI 02919