

**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.** 000788492**2. Name of Corporation** EAST LONG POND APARTMENTS, 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

624229**4. Principal Office Address**No. and Street: 18 PARKIS AVENUECity or Town: PROVIDENCE State: RI Zip: 02907 Country: USA**5. Brief Description of the Character of the Affairs Conducted in Rhode Island**CHARITABLE PURPOSES**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	B. JOSEPH REDDISH III	23 COREY TRAIL ROAD WYOMING, RI 02898 USA
TREASURER	MATTHEW ADAMS	17 WILDWOOD DRIVE CRANSTON, RI 02920 USA
VICE PRESIDENT	DAVID ROBERT	360 SHAWOMET AVENUE WARWICK, RI 02889 USA
SECRETARY	RAYMOND MALM	1180 NARRAGANSETT BLVD CRANSTON, RI 02905 USA
DIRECTOR	MARC GAUTHIER	25 MOHAWK TRAIL CRANSTON, RI 02921 USA
DIRECTOR	DIANE SIEDLECKI	140 WILSON AVENUE WARWICK, RI 02889 USA
DIRECTOR	JOSEPH REUSCH	52 ROBINS WAY WARWICK, RI 02879 USA
DIRECTOR	JAY JOYNES	35 KENYON ST. APT 5 PROVIDENCE, RI 02903 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

GINA MERCURE 18 PARKIS AVENUE PROVIDENCE , RI 02907

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

Signed this 30 Day of April, 2024 at 11:41:29 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 B. JOSEPH REDDISH
Signature of Authorized Person

Form No. 631
Revised 09/07

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