



**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.** 000503797

**2. Name of Corporation** IRVING SLATER LANDING CONDOMINIUM ASSOCIATION

**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

813910

**4. Principal Office Address**

No. and Street: 186 IRVING AVE

City or Town: PROVIDENCE State: RI Zip: 02906 Country: USA

**5. Brief Description of the Character of the Affairs Conducted in Rhode Island**

THE PURPOSE OF THE IRVING SLATER LANDING CONDOMINIUM ASSOCIATION IS TO BE THE ASSOCIATION TO WHICH REFERENCE IS MADE IN THE DECLARATION OF THE IRVING SLATER LANDING CONDOMINIUM ASSOCIATION LOCATED IN THE CITY OF PROVIDENCE, COUNTY OF PROVIDENCE, STATE OF RHODE ISLAND, AND TO PROVIDE AN ENTITY FOR THE FURTHERANCE OF THE INTERESTS OF THE UNIT OWNERS. THE ASSOCIATION SHALL HAVE THE RESPONSIBILITY OF ADMINISTERING THE CONDOMINIUM, ESTABLISHING THE MEANS AND METHODS OF COLLECTING ASSESSMENTS AND CHARGES, ARRANGING FOR THE

MANAGEMENT OF THE CONDOMINIUM AND PERFORMING ALL OTHER ACTS THAT MAY BE REQUIRED OR PERMITTED TO BE PERFORMED BY THE ASSOCIATION PURSUANT TO THE ACT AND THE DECLARATION. EXCEPT AS TO THOSE MATTERS, WHICH THE ACT SPECIFICALLY REQUIRES TO BE PERFORMED BY THE VOTE OF THE ASSOCIATION, THE FOREGOING RESPONSIBILITIES SHALL BE PERFORMED BY THE EXECUTIVE BOARD OR THE MANAGING AGENT AS MORE PARTICULARLY SET FORTH IN THESE BY-LAWS.

**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.**

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
PRESIDENT	SAAD AHMED	186 IRVING AVE PROVIDENCE, RI 02906 USA
DIRECTOR	SAAD AHMED	186 IRVING AVE PROVIDENCE, RI 02906 USA
DIRECTOR	MICHAEL NISSENSOHN	1 SLATER PROVIDENCE, RI 02906 USA
DIRECTOR	CYNTHIA BERTOZZI	184 IRVING AVE #2 PROVIDENCE, RI 02906 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**

CYNTHIA BERTOZZI 184 IRVING AVENUE PROVIDENCE, RI 02906

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

*Signed this 22 Day of May, 2024 at 11:31:48 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 SAAD AHMED  
Signature of Authorized Person

Form No. 631  
Revised 09/07