



**State of Rhode Island  
Office of the Secretary of State**

No Fee

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

**Domestic Non-Profit  
Annual Report - Amended**

Filing Period: February 1 - May 1

*In accordance with R.I.G.L. 7-1.2-1501(e), 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.*

**This form is only to be used to amend the current annual report on file with this office.**

**ANNUAL REPORT YEAR:** 2024

**1. Corporate ID No.** 000842476

**2. Name of Corporation** THE RESIDENCES AT STONE CREEK CONDOMINIUM ASSOCIATION, INC.

**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

**3. State of Incorporation**

State: RI

**4. Corporate Address in Rhode Island**

No. and Street: 177 OLD RIVER ROAD

City or Town: LINCOLN

State: RI Zip: 02865 Country: USA

**6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island**

TO CONDUCT ALL LEGAL ACTIVITIES TO OPERATE THE AFFAIRS OF THE RESIDENCES AT STONE CREEK CONDOMINIUM

**7. Names and Addresses of the Officers and Directors:**

**All officers and directors must be listed. If officers and/or directors have been elected, the title**

Incorporator is no longer applicable; please delete

THE NUMBER OF DIRECTORS OF A DOMESTIC(RHODE ISLAND)CORPORATION SHALL NOT BE LESS THAN THREE(3).  
R.I.G.L.  
7-6-23

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
DIRECTOR	RICHARD J BRADBURY	41 BREAKNECK HILL RD UNIT 31 LINCOLN, RI 02865 USA
TREASURER	RICHARD J BRADBURY	41 BREAKNECK HILL RD UNIT 31 LINCOLN, RI 02865 USA
DIRECTOR	PATRICIA KOZA	41 BREAKNECK HILL ROAD UNIT 55 LINCOLN, RI 02865 USA
DIRECTOR	GERALDINE GOLDRICK	41 BREAKNECK HILL ROAD UNIT 40 LINCOLN , RI 02865 USA

8. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER  
Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78  
  
KIRKBRAE COUNTRY ESTATES, INC. 177 OLD RIVER ROAD LINCOLN , RI 02865

Signed this 1 Day of November, 2024 at 9:38:51 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 JAMIE TAYLOR  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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State of Rhode Island

**Department of State | Office of the Secretary of State**

**Gregg M. Amore**, *Secretary of State*

I, GREGG M. AMORE, Secretary of State of the State of Rhode Island,  
  
hereby certify that this document, duly executed in accordance with the provisions  
  
of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this  
  
office on this day:

November 01, 2024 09:38 AM

A handwritten signature in black ink, reading "Gregg M. Amore". The signature is fluid and cursive, with the first letters of each word being capitalized.

Gregg M. Amore  
*Secretary of State*

