



State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2024
Non-Profit Corporation

- Filing period: February 1 - May 1
- Filing Fee: \$20.00
- Penalty: Additional \$25.00 fee if form is not filed by May 31.

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1. Entity ID Number 001055027	2. Exact name of the Corporation Cedar Brook Condominium Association
3. State of Incorporation RI	5. Brief description of the character of business conducted in Rhode Island Condo Association
4. NAICS Code 813910	

6. Principal Office Address c/o Adem Inc. 57 Main St Unit 9	City Amesbury	State MA	Zip 01913
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7. List ALL Officers (names and addresses). <input type="checkbox"/> Check the box to indicate an attachment					
President Name Derek Pacheco			Vice-President Name Heather Larche		
Street Address 75 Glenn Drive Unit 1A			Street Address 80 Stubbs Drive		
City West Warwick	State RI	Zip 02893	City Warwick	State RI	Zip 02886
Secretary Name			Treasurer Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip

8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. <input type="checkbox"/> Check the box to indicate an attachment					
Director Name Derek Pacheco, Director			Director Name Heather Larch, Director		
Street Address 75 Glenn Drive unit 1A			Street Address 80 Stubbs Drive		
City West Warwick	State RI	Zip 02893	City Warwick	State RI	Zip 02886
Director Name Christopher Wood, Director			Director Name		
Street Address C/O Adpm 77R main st			Street Address		
City Amesbury	State MA	Zip 01913	City	State	Zip

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, duly Authorized Representative, Receiver or Trustee

Name of Officer/Authorized Representative Justin Sencabaugh	Date 7/24/2024
Signature of Officer/Authorized Representative 	

MAIL TO
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

FILED 10:29
NOV 28 2024
BY WWSB