



**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 2025: 2025

1. Corporate ID No. 000029230

2. Name of Corporation Sonquippaug Association, 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

813990

4. Principal Office Address

No. and Street: P.O. BOX 1294

City or Town: CHARLESTOWN

State: RI

Zip: 02813

Country: USA

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

HOMEOWNERS ASSOCIATION

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	GREGORY POSSEMATO	10 SONQUIPAUG ROAD CHARLESTOWN, RI 02813 USA
TREASURER	NICOLE D SKOVICH	14 MICHELLE LANE CHARLESTOWN, RI 02813 USA
SECRETARY	SALLY DECELLES	74 BANCROFT PLACE HOPEDALE, MA 01747 USA
VICE PRESIDENT	HARRY G BUCKHEIT	26 JACQULEINE LANE CHARLESTOWN, RI 02813 USA
DIRECTOR	EMILIE ARMSTRONG	35 GARDEN STREET SHARON, MA 02067 USA
DIRECTOR	FELICE JAKUBIAK	PEACH TREE DRIVE MILBURY, MA 01527 USA
DIRECTOR	JOSHUA HERMAN	97 MILLER HILL RD LAGRANGEVILLE, NY 12540 USA
DIRECTOR	RICHARD SCOVICH	14 MICHELLE LANE CHARLESTOWN, RI 02813 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

PAULA BUCKHEIT 26 JACQUELINE LANE CHARLESTOWN , RI 02813

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

Signed this 12 Day of January, 2025 at 4:17:02 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 NICOLE SKOVICH
Signature of Authorized Person

Form No. 631
Revised 09/07

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