



State of Rhode Island  
Department of State - Business Services Division

Annual Report for the year: **2025**

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.

FILED  
APR 25 2025  
BY 2021

1. Entity ID Number <b>000127038</b>		2. Exact name of the Corporation <b>SEVEN FARMS, INC.</b>	
3. State of Incorporation <b>RHODE ISLAND</b>		5. Brief description of the character of business conducted in Rhode Island <b>TO ACT AS THE GENERAL PARTNER OF COVENTRY APARTMENTS, L.P. A RHODE ISLAND LIMITED PARTNERSHIP</b>	
4. NAICS Code <b>624229-Other Communit</b>			
6. Principal Office Address <b>14 MANCHESTER CIRCLE</b>		City <b>COVENTRY</b>	State <b>RI</b>
		Zip <b>02816</b>	
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>			
President Name <b>MAUREEN K. JENDZEJEC</b>		Vice-President Name <b>R. DAVID JERVIS</b>	
Street Address <b>26 ROBBINS DRIVE</b>		Street Address <b>300 ABBOTTS CROSSING ROAD</b>	
City <b>COVENTRY</b>	State <b>RI</b>	Zip <b>02816</b>	City <b>COVENTRY</b>
			State <b>RI</b>
			Zip <b>02816</b>
Secretary Name <b>ROBERT I. ELDRED</b>		Treasurer Name <b>R. DAVID JERVIS</b>	
Street Address <b>562 PLAINFIELD PIKE</b>		Street Address <b>300 ABBOTTS CROSSING ROAD</b>	
City <b>COVENTRY</b>	State <b>RI</b>	Zip <b>02816</b>	City <b>COVENTRY</b>
			State <b>RI</b>
			Zip <b>02816</b>
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>			
Director Name <b>JANE DEPTULA</b>		Director Name <b>PHIL REYNOLDS</b>	
Street Address <b>13C MANCHESTER CIRCLE</b>		Street Address <b>ONE REYNOLDS COURT</b>	
City <b>COVENTRY</b>	State <b>RI</b>	Zip <b>02816</b>	City <b>COVENTRY</b>
			State <b>RI</b>
			Zip <b>02816</b>
Director Name <b>R. David Jervis</b>		Director Name	
Street Address <b>300 Abbotts Crossing Rd</b>		Street Address	
City <b>Coventry</b>	State <b>RI</b>	Zip <b>02816</b>	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 <b>MAUREEN K. JENDZEJEC</b>			Date <b>4/8/2025</b>
Signature of Officer/Authorized Representative <i>Maureen K. Jendzejec</i>			

MAIL TO:  
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Website: www.sos.ri.gov