	State of Rhode Office of the Secreta		Fee: \$20.00	
	Division Of Busines			
	148 W. River S			
1.00	Providence RI 029			
1030	(401) 222-30	40		
Non-Profit Corporation				
Annual Report Filing Period: February 1 - May	/ 1			
In accordance with R.I.G.L. 7-6 annual report within the time p penalty fee of \$25.00.	· · · · · · · · · · · · · · · · · · ·			
ANNUAL REPORT YEAR - EN	TER THE CURRENT YEAR 2	025 : <u>2025</u>		
1. Corporate ID No. 0016	89389			
2. Name of Corporation Saltwood Farm Homeowners Association, Inc.				
3. State of Incorporation				
State: <u>RI</u>				
	NAICS CODE			
Using the dropdown labeled N primary type of activity in whic populate a NAICS Code based box on the right. For further as	ch your entity engages. The d on the chosen selection. If	box to the right of the the NAICS Code is ki	e dropdown will	
NAICS Code				
<u>813990</u>				
4. Principal Office Address				
No. and Street: 135 BAI	LEY AVENUE			
	ETOWN State	: <u>RI</u> Zip: <u>02842</u>	Country: <u>USA</u>	
5. Brief Description of the Ch	aracter of the Affairs Condu	ucted in Rhode Island	ł	
TO PROMOTE GENERAL	WELFARE OF THE RESI	DENTS AND THE	LOT OWNERS OF	
THE SALTWOOD FARM SUBDIVISION IN MIDDLETOWN RI				
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	Add	Iress	

	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
PRESIDENT	PETER GALLIPEAU	135 BAILEY AVE. MIDDLETOWN, RI 02842 USA
TREASURER	PETER GALLIPEAU	135 BAILEY AVE. MIDDLETOWN, RI 02842 USA
SECRETARY	KATHLEEN MARIE CONNELL	135 BAILEY AVE. MIDDLETOWN, RI 02842 USA
VICE PRESIDENT	KATHLEEN MARIE CONNELL	135 BAILEY AVE. MIDDLETOWN, RI 02842 USA
DIRECTOR	PETER GALLIPEAU	135 BAILEY AVE. MIDDLETOWN, RI 02842 USA
DIRECTOR	MARTIN WILLIAM GALLIPEAU	79 BRIDGE ST APT 1R SALEM, MA 01970-4191 USA
DIRECTOR	KATHLEEN MARIE CONNELL	135 BAILEY AVE. MIDDLETOWN, RI 02842 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

KATHLEEN M. CONNELL 135 BAILEY AVE. MIDDLETOWN , RI 02842

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

Signed this 20 Day of May, 2025 at 2:38:37 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 <u>KATHLEEN M. CONNELL</u> Signature of Authorized Person

Form No. 631 Revised 09/07

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