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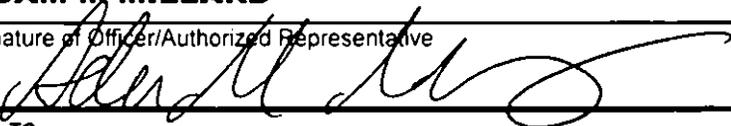
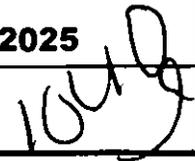
**State of Rhode Island
Department of State - Business Services Division**

STAMP

FOR
SECRETARY OF STATE
R.I. 02903

Annual Report for the year: 2026
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.

1. Entity ID Number 001685047		2. Exact name of the Corporation Hill & Harbour Neighborhood Association, Inc.			
3. State of Incorporation RI		5. Brief description of the character of business conducted in Rhode Island NONPROFIT NEIGHBORHOOD ASSOCIATION			
4. NAICS Code 813110					
6. Principal Office Address 32 HYLAND AVENUE			City EAST GREENWICH	State RI 02818	Zip
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name BRIAN DOYLE			Vice-President Name PABLO DEMASCENO		
Street Address 32 HYLAND AVENUE			Street Address 215 SPRING STREET		
City EAST GREENWICH	State RI	Zip 02818	City EAST GREENWICH	State RI	Zip 02818
Secretary Name CHELSEA BERRY			Treasurer Name LAUREL ENGBRETSON		
Street Address 67 ELDREDGE AVE			Street Address 44 MAWNEY STREET		
City EAST GREENWICH	State RI	Zip 02818	City EAST GREENWICH	State RI	Zip 02818
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment <input checked="" type="checkbox"/>					
Director Name CHELSEA BERRY			Director Name LAUREL ENGBRETSON		
Street Address 67 ELDREDGE AVE			Street Address 44 MAWNEY STREET		
City EAST GREENWICH	State RI	Zip 02818	City EAST GREENWICH	State RI	Zip 02010
Director Name PABLO DEMASCENO			Director Name BRIAN DOYLE		
Street Address 215 SPRING STREET			Street Address 32 HYLAND AVENUE		
City EAST GREENWICH	State RI	Zip 02818	City EAST GREENWICH	State RI	Zip 02818
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.					
<i>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee</i>					
Name of Officer/Authorized Representative ADAM M MILLARD				Date 10/21/2025	
Signature of Officer/Authorized Representative 				FILED 	

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

OCT 21 2025
WSACB
BY Form 641 Revised 12/2023

Attachment to Section 8 of Annual Report
for Hill & Harbour Neighborhood Association (Entity ID #001685047)

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Name: Marie Charlotte Noreng
Address: 95 West St, East Greenwich, RI 02818
Position: Director

Name: Courtney Bracey
Address: 39 Ledge Rd, East Greenwich, RI 02818
Position: Director

FILED
OCT 21 2025
BY 