RI SOS Filing Number: 202579757880 Date: 10/21/2025 10:39:00 AM

State of Rhode Island
Department of State - Business Services Division

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FOR SECRETARY OF STATE'S OFFICE ONLY

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.

1. Entity ID Number	2. Exact name of the Corporation
001685047	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	City	State	Zip
32 HYLAND AVENUE	EAST GREENWICH	RI 02818	

7. List ALL officers (names and addresses) — Check the box to indicate an attachment ☐

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 ☑

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: 02818
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.

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	Date
ADAM M MILLARD	**10/21/2025**

Signature of Officer/Authorized Representative: Adam M Millard

FILED 10:39

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
BY SCCB

FORM 631- Revised 12/2023

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

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