



State of Rhode Island
Department of State - Business Services Division

FILED

JUN 09 2021

BY 2031
[Signature]

Annual Report for the year: **2021**

Non-Profit Corporation

- Filing period: June 1 - June 30
- Filing Fee: \$20.00
- Penalty: Additional \$25.00 fee if form is not filed by July 30.

1. Entity ID Number 000126651		2. Exact name of the Corporation Bald Hill/Tollgate/Senior City Mobile Home Tenants Association			
3. State of Incorporation Rhode Island		5. Brief description of the character of business conducted in Rhode Island Educate and advise mobile homeowners and residents of Bal Hill/Tollgate/Senior City Mobile Home Park			
4. NAICS Code: <i>813319</i>					
6. Principal Office Address 979 Toll Gate Road #28		City Warwick		State RI	Zip 02886
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Michael Brown			Vice-President Name Lois Selter		
Street Address 979 Toll Gate Road # 19			Street Address 911 Toll Gate Road #36		
City Warwick	State RI	Zip 02886	City Warwick	State RI	Zip 02886
Secretary Name			Treasurer Name Janet Noke		
Street Address			Street Address 979 Toll Gate Road #28		
City	State	Zip	City Warwick	State RI	Zip 02886
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment <input type="checkbox"/>					
Director Name John Kowal			Director Name Rick Cann		
Street Address 911 Toll Gate Road #44			Street Address 979 Toll Gate Road #24		
City Warwick	State RI	Zip 02886	City Warwick	State RI	Zip 02886
Director Name Christine Ferria			Director Name		
Street Address 911 Toll Gate Road #25			Street Address		
City Warwick	State RI	Zip 02886	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.					
<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 Janet Noke				Date June 3, 2021	
Signature of Officer/Authorized Representative <i>[Signature]</i>					