



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2022
 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
 FEB 08 2022
 BY [Signature]

1. Entity ID Number 000026388		2. Exact name of the Corporation Hillside Cemetery Association						
3. State of Incorporation Rhode Island		5. Brief description of the character of business conducted in Rhode Island Burials						
4. NAICS Code 812220								
6. Principal Office Address 313 Neck Road				City Tiverton		State RI	Zip 02878	
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>								
President Name Richard Guilmond				Vice-President Name None				
Street Address 37 Neck Road				Street Address				
City Tiverton		State RI	Zip 02878		City	State	Zip	
Secretary Name Robert C. Martin				Treasurer Name Robert C. Martin				
Street Address 313 Neck Road				Street Address 313 Neck Road				
City Tiverton		State RI	Zip 02878		City Tiverton		State RI	Zip 02878
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 Gerald Silva				Director Name David Holmes				
Street Address 109 North Court				Street Address 3631 Main Road				
City Tiverton		State RI	Zip 02878		City Tiverton		State RI	Zip 02878
Director Name Donald Snell				Director Name Roger Gauthier				
Street Address 127 Bulgarmarsh Road				Street Address 189 Highland Road				
City Tiverton		State RI	Zip 02878		City Tiverton		State RI	Zip 02878
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 Robert C. Martin, Secretary						Date 02/03/2022		
Signature of Officer/Authorized Representative <u>Robert C. Martin, Secretary</u>								

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