



**State of Rhode Island  
Office of the Secretary of State**

**Fee: \$20.00**

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

**Non-Profit Corporation  
Annual Report**

Filing Period: February 1 - May 1

*In accordance with R.I.G.L. 7-6-94, each corporation failing or refusing to file its annual report within the time prescribed by law (R.I.G.L. 7-6-91) is subject to a penalty fee of \$25.00.*

**ANNUAL REPORT YEAR:** 2023

**1. Corporate ID No.** 001667090

**2. Name of Corporation** SOUTH SHORE VILLAGE RI CONDOMINIUM ASSOCIATION

**3. State of Incorporation**

State: RI

**ARTICLE III**

Using the dropdown labeled NAICS Code below, select the classification title that describes the primary type of activity in which your entity engages. The box to the right of the dropdown will populate a NAICS Code based on the chosen selection. If the NAICS Code is known, enter it into the box on the right. For further assistance with selecting a classification [click here](#).

NAICS Code  
813910

**4. Principal Office Address**

No. and Street: 181 KNIGHT STREET

City or Town: WARWICK

State: RI

Zip: 02886

Country: USA

**5. Brief Description of the Character of the Affairs Conducted in Rhode Island**

PROVIDE FOR THE ADMINISTRATION OPERATION MANAGEMENT  
MAINTENANCE PRESERVATION AND CONTROL OF THE SOUTH KINGSTOWN  
VILLAGE RI CONDOMINIUM ASSOCIATION IN THE TOWN OF SOUTH KINGSTOWN  
COUNTY OF WASHINGTON STATE OF RHODE ISLAND ESTABLISHED PURSUANT OF  
THE RHODE ISLAND CONDOMINIUM ACT

**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.**

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
PRESIDENT	LAWRENCE C. LEBLANC	P.O. BOX #1299 CHARLESTOWN, RI 02813 USA
DIRECTOR	STEPHEN B. KENYON	133 OLD TOWER HILL RD., SUITE 1 WAKEFIELD, RI 02879 USA
DIRECTOR	JAMES BARROW	1364 SMITH STREET NORTH PROVIDENCE, RI 02911 USA
DIRECTOR	ERIC TORNSTROM	70 FESCUE LANE, B14 WAKEFIELD, RI 02879 USA
DIRECTOR	EDWARD SPARROW	66 DRIVER LANE, C19 WAKEFIELD, RI 02879 USA
DIRECTOR	LAWRENCE C. LEBLANC	P.O. BOX #1299 CHARLESTOWN, RI 02813 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**

JOHN P. MORGAN 181 KNIGHT STREET WARWICK , RI 02886

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

**Signed this 24 Day of April, 2023 at 9:32:19 AM 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 LAWRENCE LEBLANC  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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