RI SOS Filing Number: 202452650770 Date: 4/26/2024 7:11:00 AM



# 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 - ENTER THE CURRENT YEAR **2024**: <u>2024</u>

- 1. Corporate ID No. <u>001702357</u>
- 2. Name of Corporation Crandall Farmstead Homeowners Association
- 3. State of Incorporation

State: RI

## **NAICS CODE**

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 <u>click here.</u>

NAICS Code

813910

#### 4. Principal Office Address

No. and Street: 56 PARK AVENUE

City or Town: WESTERLY State: RI Zip: 02891 Country: USA

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

## THE COLEECTION OF ANNUAL ASSOCIATION DUES FOR ROAD MAINETANCE.

### 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.

Title	Individual Name	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country

PRESIDENT	LINDSAY BLIVEN	94 MATTHIUS LANE
		CHARLESTOWN, RI 02813 USA
		CHARLESTOWN, RI 02013 03A
TREASURER	STEPHANIE CAHOON	56 PARK AVE.
		WESTERLY, RI 02891 USA
		WESTERET, RE02091 05A
SECRETARY	AMANDA GACCIONE	59 MATTHIUS LANE
		CHARLESTOWN, RI 02813 USA
		CHARLESTOWN, RI 02010 00A
VICE PRESIDENT	SABRINA KUDRICK	74 MATTHIUS LANE
		CHARLESTOWN, RI 02813 USA
		OTHER CONTROL OF CONTR
DIRECTOR	SABIRNA KUDRICK	74 MATTHIUS LANE
		CHARLESTOWN, RI 02813 USA
		OTHER CONTROL OF THE
DIRECTOR	AMANDA GACCIONE	59 MATTHIUS LANE
		CHARLESTOWN, RI 02813 USA
		0111 (KEE010 WK), KI 02010 00, K
DIRECTOR	STEPHANIE LYNN CAHOON	56 PARK AVENUE
		WESTERLY, RI 02891 USA
		7720121121,111 02001 0071
DIRECTOR	LINDSAY BLIVEN	94 MATTHIUS LANE
		CHARLESTOWN, RI 02813 USA
		CHARLESTOWN, RI 02013 03A

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

STEPHANIE CAHOON 56 PARK AVENUE WESTERLY, RI 02891

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

Signed this 26 Day of April, 2024 at 7:13:41 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 STEPHANIE L CAHOON

Signature of Authorized Person

Form No. 631 Revised 09/07

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