



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2008

Filing Period: June 1 - June 30 • Filing Fee: \$20.00 * THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK
* 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.

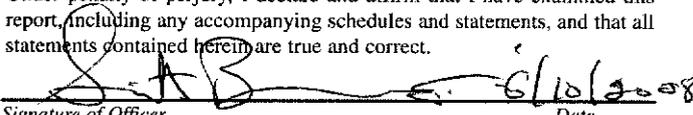
1. Corporate ID No. 30127		2. Name of Corporation WESTERLY YOUTH BASKETBALL LEAGUE, INC.			
3. State of Incorporation RHODE ISLAND		4. Corporate address in Rhode Island - Street Address 2 ELM STREET - P.O. BOX 414		City WESTERLY	Zip 02891
5. Foreign corporation. Enter principal office address			City	State	Zip
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island RECREATIONAL ACTIVITIES FOR CHILDREN - BASKETBALL					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name SCOTT BAVASSO			Vice President Name DON YOUNG		
Street Address 3 NICHOLS LANE			Street Address 13 MIDWAY AVENUE		
City WESTERLY	State RI	Zip 02891	City WESTERLY	State RI	Zip 02891
Secretary Name THERESA GUARNIERI			Treasurer Name SCOTT BAVASSO		
Street Address BRANBERRY DRIVE			Street Address 3 NICHOLS LANE		
City WESTERLY	State RI	Zip 02891	City WESTERLY	State RI	Zip 02891
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23					
Director Name MAURICE GUARNIERI			Director Name MICHAEL SULLIVAN		
Street Address BRANBERRY DRIVE			Street Address 64 BELLEVUE AVENUE		
City WESTERLY	State RI	Zip 02891	City WESTERLY	State RI	Zip 02891
Director Name MICHAEL NAJIM			Director Name		
Street Address 14 NUTMEG DRIVE			Street Address		
City WESTERLY	State RI	Zip 02891	City	State	Zip
9. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78					
Agent Name CHARLES SOLOVEITZIK			Address 2 ELM STREET		
Address P.O. BOX 414			City WESTERLY	Zip 02891	

This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



FILED	
File Date	JUN 12 2008
Check No.	9509
By:	By
FOR SECRETARY OF STATE USE ONLY	

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.


Signature of Officer Date
6/10/2008

SCOTT BAVASSO
Print or Type Name of Officer
President
Title of Officer