

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

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2009

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.	2. Name of Corporation						
228555	Providence Working	Providence Working Waterfront Alliance, Inc.					
3. State of incorporation	4. Corporate address in Rhode Island - Street Address			City	Zip		
Rhode Island	242 Allens Avenue			Providence	02905		
5. Foreign corporation. Enter princ	cipal office address		City	State	Z i p		
]				
6. Brief Description of the character of the affairs which are actually conducted in Rhode island							
To protect and promote a working waterfront in the Port of Providence.							
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) [FILL IN SPACES BEFORE USING ATTACHMENTS							
President Name			Vice President Name				
Joel H. Cohen, Chairman			None				
Street Address			Street Address				
242 Allens Avenue							
City	State	Zip	City	State	ΖÞ		
Providence	RI	02905					
Secretary Name			Treasurer Name				
David Cohen			David Cohen				
Street Address			Street Address				
242 Allens Avenue			242 Allens Avenue				
City	State	Zip	City	State	Zip		
Providence	Ri	02905	Providence	l RI	02905		
8. NAMES AND ADDRESSES	OF THE DIRECTOR	S: ("X" BOX FOR ATTAC	<i>HMENT)</i> FILL IN SPACES B	EFORE USING ATTACH	IMENTS		
THE NUMBER OF DIRECTO	ORS OF A DOMESTIC	C (RHODE ISLAND) C	ORPORATION <u>SHALL NOT E</u>	BE LESS THAN THREE	(3). R.I.G.L. 7-6-23		
Director Name			Director Name				
Joel H. Cohen			John Everson				
Street Address			Street Address				
242 Allens Avenue			223 Allens Avenue				
Clly	State	Zip	City	State	Zip		
Providence	RI	02905	Providence	RI	02905		
Director Name			Director Name				
Burton S. Russeli			None				
Street Address			Street Address				
144 Allens Avenue							
City	State	Zip	Clly	State	Zip		
Providence	RI	02905					
9. REGISTERED AGENT IN RHODE ISLAND							
This information is currently of record in the Office of the Secretary of State. Changes require filing of Form 641 - R.I.G.L. 7-6-13/7-6-78							
This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee							

FILED				
Check NO. MAY 2 6 2009				
By: By 1043	-			
FOR SECRETARY OF STATE USE ONLY				

228555

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	
trutt Cohen	5/22/09
Signature of Officer	Date
Joel H. Cohen	
Print or Type Name of Officer	
Chairman	
Title of Officer	

Form 631 Rev. 09/17