

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 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 Corp				V. *** A		
30198		Wickaboxet Camp Association					
3. State of Incorporation	1 1	dress in Rhode Island - Street i	Address	City	ZΨ		
Rhode Island	50 Niantic	Trail		West Greenwich	02817		
5. Foreign corporation. Enter principal office address			Gity	State	Ζip		
6. Brief Description of the char	acter of the affairs whic	th are actually conducted in Ri	bode Island				
Non profit Organization	for neighborhood	and beach improvemen	nt				
7. NAMES AND ADDRE	SSES OF THE OF	FICERS: ("X" BOX FOR A	TTACHMENT) [FILL IN SPACE	S BEFORE USING ATTACH	IMENTS		
President Name			Vice President Name				
Henry Cassese III			Kathy Silvers				
Street Address			Street Address				
22 Wampanaug Trail			5 Wampanaug Trail				
City Wood Oronnuish	State	Zip	City.	State	Zip		
West Greenwich	RI	02817	West Greenwich	RI	02817		
Jane Cassese	Secretary Name			Treasurer Name			
	·		Cynthia Hudson				
Street Address 22 Wampanaug Trail			Street Address 50 Niantic Trail				
City	State	Zip	City	State	Ζψ		
West Greenwich	RI	02817	West Greenwich	RI	02817		
8. NAMES AND ADDRE	SSES OF THE DIE	RECTORS: ("X" BOX FOR	ATTACHMENT) TILL IN SPACE	ES BEFORE USING ATTACI	HMENTS		
THE NUMBER OF DIRI	ECTORS OF A DO	MESTIC (RHODE ISLA	ND) CORPORATION SHALL NO	OT BE LESS THAN THREE	(3). R.I.G.L. 7-0		
Don Christy			Kathy Silvers				
Street Address			Street Address				
103 Cove Avenue City State			5 Wampanaug Trail				
Warwick	State RI	2φ 02889	West Croonwish	State	<i>Ζφ</i> 02817		
Director Name	INI	02009	West Greenwich Director Name	RI	102017		
Henry Cassese III			DIEGOI SAME				
Street Address			Street Address				
22 Wampanaug Trail							
City:	State	Zip	City	State	Zifi		
West Greenwich	Ri	02817	"		,		
9. REGISTERED AGENT				,	1		
This information is curre	ntly of record in th	e Office of the Secretary of	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 Vic	e President, Secretary, Assistant	Secretary Treasurer Recei-	ver or Trustee		
ins report	oc aigned by	ordinar the Prostucint, vic	o i resident, deciciary, Assistant	receiving, freasurer, Recei	TOI OI TIUSCEL		

File Date _FILED	1
Check NJUN 2 2 2009	
By: By /08	
FOR SECRETARY OF STATE USE ONLY	

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Under penalty of perjury, I declare and affirm that report, including any accompanying schedules and s	
statements contained herein are true and correct.	
antikea Malser	65.200
Signature of Officer	Date
Cynthia Hudson	
Print or Type Name of Officer	
Treasurer/administrator	
Title of Officer	

Form 631 Rev. 09/17