

A. Ralph Mollis, Secretary c Corporations L

148 W. Rive

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 60 401 22 401 22 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 subth

Providence, RI 0290 401.22

to a penalty fee of \$25.00.		,	у муж из импин геринг <u>и</u> нг	on the time prescribed by law	(R.LG.L 7-6-91) is sub	
1 Corporate ID No	2. Name of Corporation	2. Name of Corporation				
146668	World Aquacultu	World Aquaculture Institute Corporation				
3. State of Incorporation	4. Corporate address i	4. Corporate address in Rhode Island - Street Address			Zip	
Rhode Island	210 Bellevue A			City Newport		
5. Foreign corporation. Enter p.	rincipal office address		City	State	02840 Zip	
				chare	Zip	
President Name		. 1 1 ~	٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠	the Environm ACES BEFORE USING ATTA	EDUCATION. ent. CHMENTS	
William Connor			Justin Connor			
Street Address			Street Address			
210 Bellevue Avenue			210 Bellevue Ave			
City	State	Zip	City	State	Zip	
Newport	Rhode Island	02840	Newport	Rhode Island	02840	
Secretary Name			Treasurer Name			
Dave Dopre			Gary Galbraith			
Street Address 210 Bellevue Ave			Street Address 519 Bellevue Ave			
Cuy	State	Zφ	City	State	Zip	
Newport	Rhode Island	02840	Newport	Rhode Island	02040	
8. NAMES AND ADDRESSI	ES OF THE DIRECTO	RS: ("X" BOX FOR A	TACHMENT) FILL IN SP	ACES BEFORE USING ATTA	UZQ4U CEMBRITO	
Director Name William Connor	TORS OF A DOMEST	IC (RHODE ISLANI	D) CORPORATION SHALL Director Name Gary Galbraith	NOT BE LESS THAN THRE	EE (3). R.I.G.L. 7-6	
Street Address			Street Address			
210 Bellevue Avenue			210 Bellevue Ave			
City	State	Zip	Сиу	State	Ζψ	
Newport	Rhode Island	02840	Newport	Rhode Island	02840	
Director Name Dave Dupre			Director Name		102010	
Street Address 210 Bellevue Ave			Street Address			
Cury	State	Zip	City	State	ZD (
Newport	Rhode Island	02840	i	State	20 TO 100	
William Connor	RHODE ISLAND - D	O NOT ALTER - Ch	anges require filing of Fo	orm 641 - R.I.G.L. 7-6-137	7-62-78	
Address			City	Zip 🛣		
210 Bellevue Avenue			Newport	02870	620	
This report must	be signed by either t	he President, Vice P	resident, Secretary, Assistar	nt Secretary, Treasurer, Errei		
		1				

	FILED	
1 4 6 6 6 8	AUG 25 2009	Under penalty of perjury. I declare and affirm that I have examined t
File Date	BOND	report, including any accompanying schedules and statements, and that statements contained herein are true and correct.
Check No.	1 29-9740 9	Signature of Officer Dute
By:		Print or Type Name of Officer
FOR SECRETARY OF STATE USE ONLY		Title of Officer COB
	•	Form 631 Rev. 12/