



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 2010**

**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.<br><b>14560</b>                                                                                                                                                                             |                    | 2. Name of Corporation<br><b>WESTERLY-PAWCATUCK JOINT DEVELOPMENT TASK FORCE, INC.</b>        |                                                  |                         |                     |
| 3. State of Incorporation<br><b>RHODE ISLAND</b>                                                                                                                                                                |                    | 4. Corporate address in Rhode Island - Street Address<br><b>PO BOX 1713 - RAILROAD AVENUE</b> |                                                  | City<br><b>WESTERLY</b> | Zip<br><b>02891</b> |
| 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<br><b>TO PROMOTE DEVELOPMENT AND REVITALIZATION IN THE DOWNTOWN AREAS OF WESTERLY, R.I. AND PAWCATUCK, CT</b> |                    |                                                                                               |                                                  |                         |                     |
| 7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS                                                                               |                    |                                                                                               |                                                  |                         |                     |
| President Name<br><b>PETER L. LEWISS</b>                                                                                                                                                                        |                    |                                                                                               | Vice President Name<br><b>KATHRYN TAYLOR</b>     |                         |                     |
| Street Address<br><b>26 WINDWARD DRIVE</b>                                                                                                                                                                      |                    |                                                                                               | Street Address<br><b>44 BROAD STREET</b>         |                         |                     |
| City<br><b>WESTERLY</b>                                                                                                                                                                                         | State<br><b>RI</b> | Zip<br><b>02891</b>                                                                           | City<br><b>WESTERLY</b>                          | State<br><b>RI</b>      | Zip<br><b>02891</b> |
| Secretary Name<br><b>SUZANNE MOORE</b>                                                                                                                                                                          |                    |                                                                                               | Treasurer Name<br><b>KATHRYN TAYLOR</b>          |                         |                     |
| Street Address<br><b>P.O. BOX 659</b>                                                                                                                                                                           |                    |                                                                                               | Street Address<br><b>44 BROAD STREET</b>         |                         |                     |
| City<br><b>MYSTIC</b>                                                                                                                                                                                           | State<br><b>CT</b> | Zip<br><b>06355</b>                                                                           | City<br><b>WESTERLY</b>                          | State<br><b>RI</b>      | Zip<br><b>02891</b> |
| 8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS                                                                              |                    |                                                                                               |                                                  |                         |                     |
| <b>THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23</b>                                                                                       |                    |                                                                                               |                                                  |                         |                     |
| Director Name<br><b>KATHRYN TAYLOR</b>                                                                                                                                                                          |                    |                                                                                               | Director Name<br><b>MARCO TOMASSINI</b>          |                         |                     |
| Street Address<br><b>44 BROAD STREET</b>                                                                                                                                                                        |                    |                                                                                               | Street Address<br><b>82 HIGH STREET, UNIT 21</b> |                         |                     |
| City<br><b>WESTERLY</b>                                                                                                                                                                                         | State<br><b>RI</b> | Zip<br><b>02891</b>                                                                           | City<br><b>WESTERLY</b>                          | State<br><b>RI</b>      | Zip<br><b>02891</b> |
| Director Name<br><b>DIANA URBAN</b>                                                                                                                                                                             |                    |                                                                                               | Director Name<br><b>NONE</b>                     |                         |                     |
| Street Address<br><b>146 BABCOCK ROAD</b>                                                                                                                                                                       |                    |                                                                                               | Street Address                                   |                         |                     |
| City<br><b>NORTH STONINGTON</b>                                                                                                                                                                                 | State<br><b>CT</b> | Zip<br><b>06359</b>                                                                           | City                                             | State                   | Zip                 |
| 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

14560

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

PETER L. LEWISS

Print or Type Name of Officer

PRESIDENT

Title of Officer

|                                 |                       |
|---------------------------------|-----------------------|
| File Date                       | <b>FILED</b>          |
| Check No.                       | <b>JUN 02 2010</b>    |
| By:                             | <b>By [Signature]</b> |
| FOR SECRETARY OF STATE USE ONLY |                       |