

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

<u>-2011</u>

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 OOOG41007 WindWAL	Ker Humane	COALITION ((WHC)		
3. State of Incorporation 4. Corporate address in Ri	oode Island - Street Address		WARWICK	Zip - α c α Q	
1. 2	Jove Kd, W	ARWICK RJ	+	02889	
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 To Educate People About The connection between humans + Animals.					
7. NAMES AND ADDRESSES OF THE OFFICERS:	("X" BOX FOR ATTACH	MENT) 🔲 FILL IN SPACES B	EFORE USING ATTACE	IMENTS	
President Name	1	Vice President Name			
Cynthia Vanduden	hove	Michelle Lo	0521-do		
Street Address 116 MANIEY Drive		Street Address ROUND TOP ROOD			
Pascong State RJ	zip 02859	"HAR KISVILLE	State RJ	<i>Σφ Ο</i> ∂γ30	
Secretary Name LVNNE MESSINZ		Treusurer Name KAREN LEWIS			
Street Address 4 Remains Ion Circle		Street Address 190 Mill Cove Rd			
NSmithfield State	0289C	WARWICK	State RJ	2ip 02-889	
8. NAMES AND ADDRESSES OF THE DIRECTOR	S: ("X" BOX FOR ATTAC	_		HMENTS	
THE NUMBER OF DIRECTORS OF A DOMESTIC	C (RHODE ISLAND) C		BE LESS THAN THREE	(3). R.I.G.L. 7-0-23	
Director Name Dranne Bazelak		Nosemary Warrener			
JEANNE DdZelak Street Address		Street Address			
582 Rockey Hill Rd		68 Phillips	Hill Rd		
N. Scituate State Ru	02857	Coventry	State R J	098 1C	
Diragor Name SAlotto		Deb Yablor	Iski (Dehor	ah)	
Street Address Natick Ave		Street Address 63 MOHONEY	RJ	·	
WARWICK State R.S.	0288C	Pascoa 3	State RJ	7211P 02855	
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			
File Date Check No.	JUN 01 2011			
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.

report, metading any an		
statements contained he	erein age true and correc	et.
Karen	Lewis_	6/1 boli
Signature of Officer		, bate
KAREN	Lewis	
Print or Type Name of C	fficer	

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Form 631 Rev. 09/17