



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 2011

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. <b>29466</b>		2. Name of Corporation <b>WEST WARWICK ASSISTANCE AGENCY, INC.</b>			
3. State of Incorporation <b>RHODE ISLAND</b>		4. Corporate address in Rhode Island - Street Address <b>1293 MAIN STREET</b>		City <b>WEST WARWICK</b>	Zip <b>02893</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 <b>SERVING PERSONS LIVING IN WEST WARWICK IN NEED OF ASSISTANCE FOR FOOD.</b>					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name <b>DAN SYLVESTER</b>			Vice President Name <b>WILLIAM SLINKO</b>		
Street Address <b>33 GRANDVIEW DRIVE</b>			Street Address <b>34 FERNWOOD DAIVE</b>		
City <b>WEST WARWICK</b>	State <b>R.I.</b>	Zip <b>02893</b>	City <b>CRANSTON</b>	State <b>R.I.</b>	Zip <b>02920</b>
Secretary Name <b>BECKY DAUPLAISE</b>			Treasurer Name <b>PAUL J. SUPPLE</b>		
Street Address <b>12 CARRS POND ROAD</b>			Street Address <b>66 HILLTOP DRIVE</b>		
City <b>WEST GREENWICH</b>	State <b>R.I.</b>	Zip <b>02817</b>	City <b>CRANSTON</b>	State <b>R.I.</b>	Zip <b>02920</b>
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23					
Director Name <b>TOM RAY</b>			Director Name <b>PAUL LEBLANC</b>		
Street Address <b>33 HILLTOP AVE.</b>			Street Address <b>19 NAVABRE STREET</b>		
City <b>WEST WARWICK</b>	State <b>R.I.</b>	Zip <b>02893</b>	City <b>WEST WARWICK</b>	State <b>R.I.</b>	Zip <b>02893</b>
Director Name <b>DONALD DUNNING</b>			Director Name <b>RONALD MESSIER</b>		
Street Address <b>50 PATTON</b>			Street Address <b>3 KING STREET</b>		
City <b>COVENTAY</b>	State <b>R.I.</b>	Zip <b>02816</b>	City <b>WARWICK</b>	State <b>R.I.</b>	Zip <b>02886</b>
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 **JUN 03 2011**

Check No.

By: **AY**

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.

**Paul J. Supple** 6-2-11  
Signature of Officer Date

**PAUL J. SUPPLE**  
Print or Type Name of Officer

**TREASURER**  
Title of Officer