



State of Rhode Island and Providence Plantations
Office of the Secretary of State

Fee: \$20.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Non-Profit Corporation
Annual Report**

Filing Period: June 1 - June 30

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.

ANNUAL REPORT YEAR: 2012

1. Corporate ID No. 000161918

2. Name of Corporation Mental Health Association of the Greater Westerly Area.

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: P.O. BOX 2971

City or Town: WESTERLY State: RI Zip: 02891 Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street:

City or Town: State: Zip: Country:

6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island

MENTAL HEALTH PROVIDERS FROM SOUTH COUNTY, RI AND SOUTHEAST, CT AREAS
DEDICATED TO PROVIDING INFORMATION AND RESOURCES HELPFUL FOR THE
WELL-BEING OF THE AREA COMMUNITIES.

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete

THE NUMBER OF DIRECTORS OF A DOMESTIC(RHODE ISLAND)CORPORATION SHALL NOT BE LESS THAN THREE(3). R.I.G.L.
7-6-23

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	ROBIN H BURROWS	30 HOLLEY ST WAKEFIELD , RI 02879 USA
TREASURER	SHELAH MARTIN STONE	35 SOUTH COUNTY COMMONS WAY #D10 WAKEFIELD, RI 02879 USA
SECRETARY	LAURI MAYNARD	97 CROSS ST WESTERLY, RI 02891 USA
VICE PRESIDENT	CARL REINER	6 FRANKLIN ST WESTERLY, RI 02891 USA
DIRECTOR	ROBIN BURROWS	30 HOLLEY ST WAKEFIELD, RI 02879 USA
DIRECTOR	CARL REINER	7 FRANKLIN ST WESTERLY, RI 02879 USA
DIRECTOR	SHELAGH MARTING STONE	35 SOUTH COMMONS WAY #D10 WAKEFIELD, RI 02879 USA

8. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78

JENNIFER SPIVEY-RACHLIN 85 BEACH STREET, BUILDING B, UPPER LEVEL WESTERLY , RI 02891-

9. This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver, or Trustee.

Signed this 14 Day of May, 2012 at 2:22:26 PM. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-6.*

By ROBIN BURROWS
Signature of Officer of the Corporation

President or Vice President or Secretary or Assistant Secretary or
 Treasurer or Receiver or Trustee (check one)

This report cannot be accepted for filing if an officer has executed the form and he/she is not listed in Section 7.

Form No. 631
Revised 09/07

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