



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State - Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov/business

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2012

Filing Period: June 1 - June 30 • This report must be typed or printed legibly.

Filing Fee: \$20.00 • FAILURE TO FILE THIS REPORT BY JULY 30 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. <u>158746</u>		2. Exact name of the Corporation <u>THE WESTERN GRIDIRON ASSOCIATION</u>			
3. State of Incorporation <u>RI</u>		4. Brief description of the character of business conducted in Rhode Island <u>TO SUPPORT YOUTH SPORTS AND RECREATION</u>			
5. Principal office address <u>3 CANYON DRIVE</u>			City <u>WESTERN</u>	State <u>RI</u>	Zip <u>02891</u>
6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name <u>William SANTIAGO</u>			Vice-President Name <u>ROBERT GERBER</u>		
Street Address <u>57 EAST AVE</u>			Street Address <u>3 CANYON DRIVE</u>		
City <u>WESTERN</u>	State <u>RI</u>	Zip <u>02891</u>	City <u>WESTERN</u>	State <u>RI</u>	Zip <u>02891</u>
Secretary Name <u>MATTHEW WEST</u>			Treasurer Name <u>ROBERT GERBER</u>		
Street Address <u>116 HIGH ST - STE 201A</u>			Street Address <u>3 CANYON DR.</u>		
City <u>WESTERN</u>	State <u>RI</u>	Zip <u>02891</u>	City <u>WESTERN</u>	State <u>RI</u>	Zip <u>02891</u>
7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name <u>William SANTIAGO</u>			Director Name <u>ROBERT GERBER</u>		
Street Address <u>57 EAST AVE</u>			Street Address <u>3 CANYON DR.</u>		
City <u>WESTERN</u>	State <u>RI</u>	Zip <u>02891</u>	City <u>WESTERN</u>	State <u>RI</u>	Zip <u>02891</u>
Director Name <u>MATTHEW WEST</u>			Director Name		
Street Address <u>116 HIGH ST - STE 201A</u>			Street Address		
City <u>WESTERN</u>	State <u>RI</u>	Zip <u>02891</u>	City	State	Zip
8. REGISTERED AGENT IN RHODE ISLAND					
This information is currently of record in the Office of the Secretary of State. Changes require filing Form 641.					

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

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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

MATTHEW WEST
 Print or Type Name of Officer

SECRETARY
 Title of Officer

File Date _____
 Check No _____
 By _____
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