

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 2012

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.

p j. t. oj \$23.00.						
1. Corporate ID No.	2. Name of Corporation			****		
540595	Westerly Affordable	e Housing Association				
3. State of Incorporation	4. Corporate address in I	bode Island - Street Address		City	Zip	
Rhode Island	5 Chestnut Stree			Westerly	02891	
5. Foreign corporation. Enter prin	cipal office address	<u></u>	City	State	Zip	
None	<u></u>			None	None	
6. Brief Description of the character	of the affairs which are act	ually conducted in Rhode Isla	and		·	
Provide affordable housing	opportunities for low	income families				
7. NAMES AND ADDRESSES	OF THE OFFICERS	· ("X" ROY FOR ATTACH.	MENT)	DUODE HEING ATTACK	REUNITC	
President Name		. (Vice President Name	LIORE COING ATTACH	MILIO IS	
Gary Murano			Donna Bailey			
Street Address			Street Address			
20 Hobart Street			43 Potter Hill Rd			
City	State	Zip	City	State	Zip	
Westerly	RI	02891	Westerly	RI	02891	
Secretary Name	<u>, ,,</u>		Treasurer Name	1	02001	
Brian Lumnah			Richard Longolucco			
Street Address			Street Address			
130 Canal Street			151 Alton Bradford Rd			
City	State	Zip	City	State	Zip	
Westerly	RI	02891	Bradford	RI	02808	
8. NAMES AND ADDRESSES	OF THE DIRECTOR	IS: ("X" BOX FOR ATTAC	HMENT) [] FILL IN SPACES B		IMENTS	
THE NUMBER OF DIRECTO	ORS OF A DOMESTI	C (RHODE ISLAND) C	ORPORATION SHALL NOT E	BE LESS THAN THREE	(3). R.I.G.L. 7-6-23	
Director Name		-	Director Name	,		
Gary Murano			Donna Bailey			
Street Address			Street Address			
20 Hobart Street			43 Potter Hill Rd			
City	State	Zip	City	State	Zip	
Westerly	RI	02891	Westerly	İRI	02891	
Director Name			Director Name		1	
Richard Longolucco			None			
Street Address			Street Address			
151 Alton Bradford Rd			None			
City	State	Zip	City	State	Zip	
Bradford	RI	02808	None	None	None	
9. REGISTERED AGENT IN	RHODE ISLAND	-		•	•	
This information is currently of	of record in the Office	of the Secretary of State	. Changes require filing of Form	n 641 - R.I.G.L. 7-6-13/7-	-6-78	
This report must	be signed by either t	he President, Vice Presi	ident, Secretary, Assistant Secr	retary, Treasurer, Receiv	er or Trustee	

File Date _		
Check No		
Bv:		

540505

FILED

18 2012 Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all

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statements contained berein are true and correct. Signature of Officer

Richard Longolucco Print or Type Name of Officer

Treasurer Title of Officer

Form 631 Rev. 09/17