

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: 2013

1. Corporate ID No. 000419780

2. Name of Corporation West Warwick Angels Caring for Animals, Inc.

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 23 TAYLOR ROAD

City or Town: JOHNSTON State: RI Zip: 02919 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

TO RAISE MONEY FOR THE MEDICAL CARE AND WELFARE OF ANIMALS RESIDING AT THE ANIMAL SHELTER LOCATED IN WEST WARWICK RHODE ISLAND

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	Address	
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country	
PRESIDENT	LORI RIVARD	23 TAYLOR RD JOHNSTON, RI 02919 USA	
TREASURER	KIMBERLY MCDONOUGH	86 MAYBURY ST CUMBERLAND, RI 02864 USA	

JOAN LEVITT	11 HARVARD CT CRANSTON, RI 02920 USA
AMANDA F PATERSON	22 CURTIS ST CRANSTON, RI 02920 USA
SUSAN DULAC	187 ARNOLD RD COVENTRY, RI 02816 USA
MARY YOUNG	58 POND ST WEST WARWICK, RI 02893 USA
SHANNON NAPOLITANO	8 WELFARE AVE WARWICK, RI 02888 USA
	AMANDA F PATERSON SUSAN DULAC MARY YOUNG

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

LORI RIVARD 23 TAYLOR ROAD JOHNSTON, RI 02919

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

Signed this 11 Day of September, 2013 at 2:31:44 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 LORI RIVARD

Signature of Officer of the Corporation

<u>X</u> President or	Vice President of	or Secretary or	Assistant Secretary or
Treasurer or	Receiver or	Trustee (check one	e)

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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