



**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** 2013

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. <b>71154</b>		2. Exact name of the Corporation <b>WEST Bay Anglers</b>	
3. State of Incorporation <b>Rhode Island</b>		4. Brief description of the character of business conducted in Rhode Island <b>Fishing club, Raise funds for Impossible Dream Foundation, and R.I Take a Kid Fishing</b>	
5. Principal office address <b>102 BARTLETT AVE</b>		City <b>CRANSTON</b>	State <b>R.I.</b> Zip <b>02905</b>
6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			
President Name <b>PATRICK F. Gallien</b>		Vice-President Name <b>Arthur Bryer</b>	
Street Address <b>102 Bartlett Ave</b>		Street Address <b>25 Burbank Dr.</b>	
City <b>CRANSTON</b>	State <b>R.I.</b>	City <b>WARWICK</b>	State <b>R.I.</b> Zip <b>02888</b>
Secretary Name <b>Sue Bologna</b>		Treasurer Name <b>Claudia Anthony</b>	
Street Address <b>144 Dunlan Rd.</b>		Street Address <b>241- HARRISON AVE.</b>	
City <b>WARWICK</b>	State <b>R.I.</b>	City <b>WARWICK</b>	State <b>R.I.</b> Zip <b>02888</b>
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 <b>Pamela Tameo</b>		Director Name <b>PATRICK Gallien</b>	
Street Address <b>10 Samuel Court</b>		Street Address <b>102 Bartlett AVE.</b>	
City <b>Cranston</b>	State <b>R.I.</b>	City <b>Cranston</b>	State <b>R.I.</b> Zip <b>02905</b>
Director Name <b>Frank Tameo</b>		Director Name	
Street Address <b>10 Samuel Ct.</b>		Street Address	
City <b>Cranston</b>	State <b>R.I.</b>	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

**FILED**

File Date \_\_\_\_\_

**DEC 03 2013**

Check No \_\_\_\_\_

By: \_\_\_\_\_ BY **1108**

**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.

**Patrick Gallien** **11/29/2013**  
 Signature of Officer Date

**PATRICK F. Gallien**  
 Print or Type Name of Officer  
**President**  
 Title of Officer