RI SOS Filing Number: 201436928720 Date: 03/10/2014 12:40 PM

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 2014

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.	2. Exact name of the Corporation
99477	**WEST WARWICK FRIENDS OF THE GREENWAY**
3. State of Incorporation	4. Brief description of the character of business conducted in Rhode Island
RI	**NON PROFIT ORG. IN SUPPORT OF THE WW GREENWAY**

5. Principal office address	City	State	Zip
20 KENYON ST ,	**WEST WARWICK**	**RI**	**02893**

6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) ☐

President Name	Street Address	City	State	Zip
DAVID E . PERRY	**20 KENYON ST**	**W W**	**RI**	**02893**

Vice-President Name	Street Address	City	State	Zip
JACQULINE LAFRAMBOIS	**29 WELLS ST**	**WW**	**RI**	**02893**

Secretary Name	Street Address	City	State	Zip
BARBARA GRAHAM	**32 PETERS LANE**	**WW**	**RI**	**02893**

Treasurer Name	Street Address	City	State	Zip
JOHN J FLANAGAN	**52 EXCHANGE RD**	**W W**	**R I**	**02893**

7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) ☐

Director Name	Street Address	City	State	Zip
ROBERT FLEURY	**65 CURSON ST**	**W W**	**R I**	**02893**

Director Name	Street Address	City	State	Zip
JOHN BERARD	**75 CLYDE ST**	**W W**	**R I**	**02893**

Director Name	Street Address	City	State	Zip
GERALD FITTA	**64 ROBIN LANE**	**W W**	**R I**	**02893**

Director Name	Street Address	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 MAR 10 2014

Check No 49-219519 **By**

By: A. A. 12:40 p.m.

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.

3/ 6/ 2014
Signature of Officer — Date

DAVID E. PERRY
Print or Type Name of Officer

CHAIRMAN, WWFG
Title of Officer

2014 MAR 10 PM 12:37 SECRETARY OF STATE CORPORATIONS DIV

103772-2-902848
Form No. 631
Revised: 05/2012