



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. 26091		2. Exact name of the Corporation Women's Association of the Jewish Seniors Agency of RI			
3. State of Incorporation Rhode Island		4. Brief description of the character of business conducted in Rhode Island Supports the efforts of the Jewish Seniors Agency of RI			
5. Principal office address 100 Niantic Avenue		City Providence	State RI	Zip 02907	
. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name Sylvia Brown - Co-Vice President		Vice-President Name Marcia Gerstein - Co-Vice President			
Street Address 455 Meshanticut Valley Parkway #306		Street Address 12 Rhodes Avenue			
City Cranston	State RI	Zip 02920	City East Providence	State RI	Zip 02915
Secretary Name Bernice Weiner		Treasurer Name Marcia Gerstein			
Street Address 315 Blackstone Blvd		Street Address 12 Rhodes Avenue			
City Providence	State RI	Zip 02906	City East Providence	State RI	Zip 02915
. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS <u>MUST</u> LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name Bernice Weiner		Director Name Jane Jacober			
Street Address 315 Blackstone Blvd		Street Address 30 Gilbert Stuart Drive			
City Providence	State RI	Zip 02906	City East Greenwich	State RI	Zip 02818
Director Name Myrna Levine		Director Name Maybeth Lichaa			
Street Address 85 Granite Street		Street Address 104 Governor Bradford Drive			
City East Greenwich	State RI	Zip 02818	City Barrington	State RI	Zip 02806
. 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

File Date _____

Check No _____

By: _____ BY _____

FOR SECRETARY OF STATE USE ONLY

FILED

JUN 12 2014

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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.

Marcia Gerstein 6/11/14
Signature of Officer Date

MARCIA GERSTEIN
Print or Type Name of Officer

Co-Vice President
Title of Officer