



**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

## NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR **2016**

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>00150889</b>		2. Exact name of the Corporation <b>Westerly Band</b>			
3. State of Incorporation <b>Rhode Island</b>		4. Brief description of the character of business conducted in Rhode Island <b>Non-profit community musical organization providing concerts, parades, processions, and ensemble performances for Westerly and neighboring towns.</b>			
5. Principal office address <b>P.O. Box 614</b>		City <b>Westerly</b>		State <b>RI</b>	Zip <b>02891</b>
<b>6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/></b>					
President Name <b>Roy D. Clark</b>		Vice-President Name <b>Dora Georgeady</b>			
Street Address <b>68 Palmer St.</b>		Street Address <b>29 Cronin Ave.</b>			
City <b>Pawcatuck</b>	State <b>CT</b>	Zip <b>06379</b>	City <b>Pawcatuck</b>	State <b>CT</b>	Zip <b>06379</b>
Secretary Name <b>Lin Lowe.</b>		Treasurer Name <b>Allen Leadbetter</b>			
Street Address <b>24 Fern Dr.</b>		Street Address <b>16 Handel Rd.</b>			
City <b>Westerly</b>	State <b>RI</b>	Zip <b>02891</b>	City <b>Westerly</b>	State <b>RI</b>	Zip <b>02891</b>
<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"/></b>					
Director Name <b>Alison Patton</b>		Director Name <b>John Bruno</b>			
Street Address <b>53 Quannacut Rd.</b>		Street Address <b>23 Gounod Rd.</b>			
City <b>Westerly</b>	State <b>RI</b>	Zip <b>02891</b>	City <b>Westerly</b>	State <b>RI</b>	Zip <b>02891</b>
Director Name <b>Barry Thorp</b>		Director Name			
Street Address <b>27 Flanders Rd.</b>		Street Address			
City <b>Mystic</b>	State <b>Ct</b>	Zip <b>06365</b>	City	State	Zip
<b>8. REGISTERED AGENT IN RHODE ISLAND</b>					
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, duly Authorized Representative, Receiver or Trustee

File Date	
Check No.	
By:	
FOR SECRETARY OF STATE USE ONLY	

**FILED**

MAY 16 2016

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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.

*Allen Leadbetter* Treasurer 5/13/16  
Signature of Officer or Authorized Representative Date

*Allen Leadbetter* Treasurer  
Print or Type Name of Officer or Authorized Representative