



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

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

Filing Fee: \$20.00 *FAILURE TO FILE THIS REPORT BY JULY 30 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID Number		2. Entity Name (as registered with the Corporation)		
27606		Boys & Girls Club of Warwick		
3. State of Incorporation		4. Brief description of the character of business conducted in Rhode Island		
Rhode Island		Helping young people realize their full potential		
5. Principal Office Address		City	State	Zip
42 Frederick St.		Warwick,	RI	02888
6. List ALL officers (names and addresses) <input type="checkbox"/> Check the box to indicate an attachment				
President Name John Delemontex		Vice-President Name Warren B. Galkin		
Street Address 157 Enterprise Terrace		Street Address 29 Sage Dr		
City Kingston	State RI	Zip 02881	City Warwick,	State RI Zip 02886
Secretary Name Ray Desmarias		Treasurer Name Joel Westerman		
Street Address 87 Leading St.		Street Address 55 Wrowhead Trail		
City Johnston,	State RI	Zip 02919	City East Greenwich	State RI Zip 02818
7. List ALL directors (names and addresses) RI corporations MUST list at least THREE directors <input type="checkbox"/> Check the box to indicate an attachment				
Director Name Lara D'Antuono		Director Name Steve Tilley		
Street Address 49 Green Farms Lane		Street Address 116 Mourning Dove Dr.		
City North Kingstown	State RI	Zip 02852	City Saunderstown	State RI Zip 02871
Director Name Warren Galkin		Director Name		
Street Address 29 Sage Dr		Street Address		
City Warwick	State RI	Zip 02886	City	State Zip
8. Registered Agent in Rhode Island: (This information is currently of record with the Department of State. Changes require filing Form 641.)				
Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all information contained herein are true and correct.				
This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.				
Name of Officer/Authorized Representative Lara D'Antuono				Date 5/12/2016
Signature of Officer/Authorized Representative SIGN DOCUMENT HERE				

FILED

MAY 16 2016

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