State of Rhode Island and Providence Plantations
Office of the Secretary of State

Fee: $20.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

Non-Profit Corporation Annual Report

Filing Period: June 1 - June 30

In accordance with R.I.G.L. 7-6-94, each corporation failing or refusing to file its annual report within the time prescribed by law (R.I.G.L. 7-6-91) is subject to a penalty fee of $25.00.

ANNUAL REPORT YEAR: 2016

1. Corporate ID No. 000146668

2. Name of Corporation World Aquaculture Institute Corporation

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: C/O WILLIAM CONNOR
11 CHARTIER CIRCLE
City or Town: NEWPORT State: RI Zip: 02840 Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street:

City or Town: State: Zip: Country:

6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island

TO ADVANCE NUTRITION, MEDICINE, AND THE ENVIRONMENT, BY ENHANCEMENT OF THE WORLDS PROTEIN SUPPLY TO FEED THE WORLD THROUGH PROMOTION OF MARINE, BIOTECHNOLOGY, PHARMACOLOGY RESEARCH, DEVELOPMENT, IMPLEMENTATION

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete

THE NUMBER OF DIRECTORS OF A DOMESTIC(RHODE ISLAND)CORPORATION SHALL NOT BE LESS THAN THREE(3). R.I.G.L. 7-6-23

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	WILLIAM CONNOR	11 CHARTIER CIRCLE

		NEWPORT, RI 02840 USA
VICE PRESIDENT	DAVID DUPRE	228 PENDAR ROAD NORTH KINGSTOWN, RI 02852 USA
VICE PRESIDENT	JUSTIN CONNOR	214 MESHANTICUT VLY PKWY CRANSTON, RI 02920 USA
DIRECTOR	DAVID J DUPRE	228 PENDER RD NORTH KINGSTOWN, RI 02852 USA
DIRECTOR	JUSTIN M CONNOR	214 MESHANTICUT VLY PKWY CRANSTON, RI 02920 USA
DIRECTOR	WILLIAM F. CONNOR	11 CHARTIER CIRCLE NEWPORT, RI 02840 USA
DIRECTOR	GARY GALBRAITH	9 TURODERO PORT ST LUCIE, FL 34952 USA

8. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78

WILLIAM CONNOR 11 CHARTIER CIRCLE NEWPORT , RI 02840

9. This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver, or Trustee.

Signed this 9 Day of June, 2016 at 8:32:54 AM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-6.*

By WILLIAM F. CONNOR
Signature of Authorized Person

Form No. 631
Revised 09/07