



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. 000029312

2. Name of Corporation Westbay Community Action, Inc.

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 224 BUTTONWOODS AVENUE

City or Town: WARWICK

State: RI Zip: 02886 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

COMMUNITY ACTION PROGRAM

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	PAUL SALERA	1 HARVEST ROAD REHOBOTH, MA 02769 USA
DIRECTOR	JANE LISTER	57 COREY AVENUE EAST GREENWICH, RI 02818 USA
DIRECTOR	STANLEY OLSZEWSKI	51 1/2 QUEEN ST

		EAST GREENWICH, RI 02818 USA
DIRECTOR	LINDAGAY PALAZZO	16 KRISTEE CIRCLE WEST WARWICK, RI 02893 USA
DIRECTOR	MANNY MURRAY	145 WASHINGTON ST WEST WARWICK, RI 02893 USA
DIRECTOR	KEVIN CARTER	1629 WARWICK AVE WARWICK, RI 02889 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**

JEANNE M. GATTEGNO 224 BUTTONWOODS AVENUE WARWICK , RI 02886

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

Signed this 13 Day of June, 2016 at 10:27:23 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 PAUL SALERA
Signature of Authorized Person

Form No. 631
Revised 09/07

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