



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. 000029744

2. Name of Corporation WEST ELMWOOD HOUSING DEVELOPMENT CORPORATION

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 224 DEXTER STREET

City or Town: PROVIDENCE

State: RI Zip: 02907 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

SEEK RESOLUTIONS TO HOUSING AND RELATED PROBLEMS IN THE WEST ELMWOOD NEIGHBORHOOD AND THE FOSTERING OF LOW INCOME HOUSING.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	ANGELA ANKOMA	16 VINEYARD STREET PROVIDENCE, RI 02907 USA
TREASURER	SHOMARI HUSBAND	224 DEXTER ST PROVIDENCE, RI 02907 USA

SECRETARY	PAMELA ROSS	178 REYNOLDS STREET PROVIDENCE, RI 02905 USA
DIRECTOR	YVETTE KENNER	230 DEXTER ST PROVIDENCE, RI 02907 USA
DIRECTOR	CLAUDIA MCCONAGHY	39 JUNIPER DR WEST WARWICK, RI 02893 USA
DIRECTOR	CECILIA MEDEIROS	99 SUPERIOR ST PROVIDENCE, RI 02907 USA
DIRECTOR	ELIZABETH DEBS	224 DEXTER STREET PROVIDENCE, RI 02907 USA
DIRECTOR	VICTOR ROSS	178 REYNOLDS STREET PROVIDENCE, RI 02907 USA
DIRECTOR	ELFREDA THORPE	230 DEXTER STREET PROVIDENCE, RI 02907 USA
DIRECTOR	GEORGINA SARPONG	224 DEXTER STREET PROVIDENCE, RI 02907 USA
DIRECTOR	SEAN FONTES	224 DEXTER STREET PROVIDENCE, RI 02907 USA
DIRECTOR	TAINO PALERMO	224 DEXTER STREET PROVIDENCE, RI 02907 USA
DIRECTOR	PAUL RITUALO	224 DEXTER STREET PROVIDENCE, RI 02907 USA
DIRECTOR	SHEILA TAYLOR-CLARKE	224 DEXTER STREET PROVIDENCE, RI 02907 USA
DIRECTOR	JULIUS SEARIGHT	224 DEXTER ST PROVIDENCE, RI 02907 USA
DIRECTOR	SANDRA VIERA	224 DEXTER ST PROVIDENCE, RI 02907 USA
DIRECTOR	CHERYL ISOM	224 DEXTER ST PROVIDENCE, RI 02907 USA
DIRECTOR	EMILY VANDERDOES	224 DEXTER ST PROVIDENCE, RI 02907 USA
DIRECTOR	DINA OUTER	224 DEXTER ST PROVIDENCE, RI 02907 USA
DIRECTOR	MAYRA SOTO-JOHNSON	224 DEXTER ST PROVIDENCE, RI 02907 USA
DIRECTOR	CAROLYN MEDINA	224 DEXTER ST PROVIDENCE, RI 02907 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

MISHELL LILLY 224 DEXTER STREET PROVIDENCE , RI 02907

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

Signed this 30 Day of July, 2016 at 8:59:09 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 PAMELA ROSS
Signature of Authorized Person

Form No. 631
Revised 09/07

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