



**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:** 2017

**1. Corporate ID No.** 000120262

**2. Name of Corporation** Woonasquatucket River Watershed Council

**3. State of Incorporation**

State: RI

**ARTICLE III**

Using the dropdown labeled NAICS Code below, select the classification title that describes the primary type of activity in which your entity engages. The box to the right of the dropdown will populate a NAICS Code based on the chosen selection. If the NAICS Code is known, enter it into the box on the right. For further assistance with selecting a classification [click here](#).

NAICS Code

6

813312

**4. Corporate Address in Rhode Island**

No. and Street: 45 EAGLE ST, SUITE 202

City or Town: PROVIDENCE

State: RI

Zip: 02909

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 ENCOURAGE, SUPPORT AND PROMOTE THE RESTORATION AND PRESERVATION OF THE WOONASQUATUCKET RIVER WATERSHED AS AN ENVIRONMENTAL, RECREATIONAL, CULTURAL AND ECONOMIC ASSET OF THE STATE OF RHODE ISLAND.

**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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**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**

| <b>Title</b>   | <b>Individual Name</b><br>First, Middle, Last, Suffix | <b>Address</b><br>Address, City or Town, State, Zip Code, Country |
|----------------|-------------------------------------------------------|-------------------------------------------------------------------|
| PRESIDENT      | ROY NAJECKI                                           | 1203 REYNOLDS ROAD<br>CHEPACHET, RI 02814 USA                     |
| TREASURER      | CHRISTOPHER RIELY                                     | 42 HARKNESS STREET<br>PROVIDENCE, RI 02909 USA                    |
| VICE PRESIDENT | DONALD BURNS                                          | 98 STILLWATER RD<br>SMITHFIELD, RI 02917 USA                      |
| DIRECTOR       | LAUREEN RATTI                                         | 9 FAWN CIRCLE<br>CHARLESTOWN, RI 02813 USA                        |
| DIRECTOR       | TIMOTHY OCONNOR                                       | 124 OLNEY AVE<br>NORTH PROVIDENCE, RI 02911 USA                   |
| DIRECTOR       | LOUIS LARIVIERE                                       | 75 GREENVILLE AVENUE<br>NORTH PROVIDENCE, RI 02911 USA            |
| DIRECTOR       | SCOTT GELLER                                          | 19 TRISTAN COURT<br>SMITHFIELD, RI 02917 USA                      |
| DIRECTOR       | JOHN HAKE                                             | 58 PROSPECT STREET<br>FRANKLIN, MA 02038 USA                      |
| DIRECTOR       | AYANNA BASS                                           | 17 GODDARD ST<br>PROVIDENCE, RI 02908 USA                         |
| DIRECTOR       | JACK A GOLD                                           | 32 DEXTER STREET<br>PROVIDENCE, RI 02909 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**

ALICIA J. LEHRER 45 EAGLE STREET, SUITE 202 PROVIDENCE , RI 02909

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

**Signed this 8 Day of June, 2017 at 1:25:49 PM 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 ROY NAJECKI  
Signature of Authorized Person

Form No. 631  
Revised 09/07

