



State of Rhode Island and Providence Plantations

## Department of State - Business Services Division

Annual Report for the year: 2017

## Non-Profit Corporation

→ Filing period: June 1 - June 30

→ Filing Fee: \$20.00

→ Penalty: Additional \$25.00 fee if form is not filed by July 30.

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R.I. DEPT. OF STATE  
BUS SVCS DIV

2017 JUL -3 PM 2:01

1. Entity ID Number <u>83608</u>		2. Exact name of the Corporation <u>West Bay Choral</u>			
3. State of Incorporation <u>RI</u>		5. Brief description of the character of business conducted in Rhode Island <u>Choral singing programs.</u>			
4. NAICS Code <u>561599</u>					
6. Principal Office Address <u>PO Box 8856</u>			City <u>Warwick</u>	State <u>RI</u>	Zip <u>02888</u>
7. List ALL officers (names and addresses)					Check the box to indicate an attachment <input type="checkbox"/>
President Name <u>Jeni Luther</u>			Vice-President Name <u>Mark Putnam</u>		
Street Address <u>5 Elmonte Dr.</u>			Street Address <u>28 Slater Ave.</u>		
City <u>Coventry</u>	State <u>RI</u>	Zip <u>02816</u>	City <u>Warwick</u>	State <u>RI</u>	Zip <u>02899</u>
Secretary Name <u>Wanda Hopper</u>			Treasurer Name <u>John Marsella</u>		
Street Address <u>160 Selma St.</u>			Street Address <u>129 Hawkins Blvd.</u>		
City <u>Cranston</u>	State <u>RI</u>	Zip <u>02920</u>	City <u>North Prov.</u>	State <u>RI</u>	Zip <u>02911</u>
8. List ALL directors (names and addresses). RI Corporations <b>MUST</b> list at least <b>THREE</b> directors.					Check the box to indicate an attachment <input type="checkbox"/>
Director Name <u>Heather Barry</u>			Director Name <u>Anthony Tribelli</u>		
Street Address <u>38 Carrie Ann Drive</u>			Street Address <u>7 Robbins Dr.</u>		
City <u>Cranston</u>	State <u>RI</u>	Zip <u>02921</u>	City <u>Barrington</u>	State <u>RI</u>	Zip <u>02806</u>
Director Name <u>Sandra Hyland</u>			Director Name <u>Ellen Conner</u>		
Street Address <u>50 Long Lane</u>			Street Address <u>2616 Harkney Hill Rd.</u>		
City <u>N. Kingstown</u>	State <u>RI</u>	Zip <u>02852</u>	City <u>Coventry</u>	State <u>RI</u>	Zip <u>02816</u>
9. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641.					
<b>Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.</b>					
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 <u>John Marsella</u>					Date <u>7/3/17</u>
Signature of Officer/Authorized Representative <u>John Marsella</u>					

FILED

JUL 03 2017

BY Ch 307494