



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.

1. Entity ID Number <b>60607</b>		2. Exact name of the Corporation <b>THE WEST WARWICK JAYCEES EDUCATION AND LIBRARY FOUNDATION</b>			
3. State of Incorporation <b>RHODE ISLAND</b>		5. Brief description of the character of business conducted in Rhode Island <i>To support and promote Educational and library products</i>			
4. NAICS Code <b>813211 - Grantmaking Foun</b>					
6. Principal Office Address <b>1551 CENTREVILLE ROAD</b>			City <b>WARWICK</b>	State <b>RI</b>	Zip <b>02886</b>
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name <b>ROBERT R. FORCIER</b>			Vice-President Name <b>JOHN J. LANCELLOTTA</b>		
Street Address <b>11 SPARROW CIRCLE</b>			Street Address <b>32 RIVER AVENUE</b>		
City <b>WEST WARWICK</b>	State <b>RI</b>	Zip <b>02893</b>	City <b>WEST WARWICK</b>	State <b>RI</b>	Zip <b>02893</b>
Secretary Name <b>JOSEPH J. DIMARTINO</b>			Treasurer Name <b>PAUL W. RICHARDS</b>		
Street Address <b>621 WAKEFIELD STREET</b>			Street Address <b>39 GARDNER AVENUE</b>		
City <b>WEST WARWICK</b>	State <b>RI</b>	Zip <b>02893</b>	City <b>WEST WARWICK</b>	State <b>RI</b>	Zip <b>02893</b>
8. List ALL directors (names and addresses). RI Corporations <b>MUST</b> list at least <b>THREE</b> directors. <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name <b>LEONARD J. DENOMME</b>			Director Name <b>FILOMENA GUSTAFSON</b>		
Street Address <b>88 LOWELL STREET</b>			Street Address <b>183 LOCKWOOD STREET</b>		
City <b>WEST WARWICK</b>	State <b>RI</b>	Zip <b>02893</b>	City <b>WEST WARWICK</b>	State <b>RI</b>	Zip <b>02893</b>
Director Name <b>GERALD FITTA</b>			Director Name		
Street Address <b>64 ROBIN LANE</b>			Street Address		
City <b>WEST WARWICK</b>	State <b>RI</b>	Zip <b>02893</b>	City	State	Zip
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>					
<i>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.</i>					
Name of Officer/Authorized Representative <i>Vice-President</i>				Date <i>7/25/17</i>	
Signature of Officer/Authorized Representative <i>John J. Lancelotta</i>				<b>FILED</b>	

MAIL TO:  
 Division of Business Services  
 148 W. River Street, Providence, Rhode Island 02904-2615  
 Phone: (401) 222-3040  
 Website: www.sos.ri.gov

**FILED**  
**JUL 31 2017**  
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**BY** \_\_\_\_\_  
 FORM 631 - Revised: 05/2017