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State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: 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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1. Entity ID Number	2. Exact name of the Corporation								
001682529	Watershed	Watershed Ecological							
3. State of Incorporation	•	5. Brief description of the character of business conducted in Rhode Island ACQUIRE, PRESERVE, MAINTAIN AND PROMOTE PUBLIC BENIFIT FROM REAL PROPERTY; FOR RESOURCE PROTECTION, EDUCATIONAL, AND CULTURAL AND SCIENTIFIC PURPOSES, BY							
Rhode Island									
4. NAICS Code	MEANS OF ENVIRONMENTAL CONSERVATION, ENVIRONMENTAL RESTORATION, AND NATURAL								
813312 - Environment, Conse	RESOURCE PROTECTION.								
6. Principal Office Address	<u> </u>		City	State	Zip				
122 Torrey Road			Wakefield	RI	02879				
7. List ALL officers (names and addresses) Check the box to indicate an attachment									
President Name Andrew Georges Bockstae!			Vice-President Name Timothy Michael Matteson						
Street Address 122 Torrey Road			Street Address 1004 B Kingstown Rd						
^{City} Wakefield	State RI	^{Zip} 02879	City Peace Dale	State RI	^{Zip} 02879				
Secretary Name Herney Londono			Treasurer Name William G Shepherd						
Street Address 2 Gray Avenue			Street Address 174 Everett Skinner Rpad						
^{City} Nashua	State NH	^{Zip} 03060	^{City} Plainville	State MA	^{Zip} 02762				
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment									
Director Name Andrew Georges Bockstael			Director Name Timothy Michael Matteson						
Street Address 122 Torrey Road			Street Address 1004 B Kingstown Road						
^{City} Wakefield	State RI	^{Zip} 02879	City Peace Dale	State RI	^{Zip} 02879				
Director Name William G Shepherd			Director Name Herney Londono						
Street Address 174 Everett Skinner Road			Street Address 2 Gray Avenue						
City Plainville	State MA	^{Zip} 02762	^{City} Nashua	State NH	^{Zip} 03060				
9. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641.									
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.									
This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treesurer, duly Authorized Representative, Receiver or Trustee.									
Name of Officer/Authorized Repres	sentative			Date					
Andrew Georges Bockstael				7/8/2019					
Signature of Officer/Aythorized Representative SIGN DOCUMEN HERE									

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.n.gov