RI SOS Filing			Date: 6/23/2020 4:00:00	PM	
Qepartment of Stat			rision		
Annual Report for the year: Non-Profit Corporation	2020		FILED		
-> Filing period: June 1 - June 30				JUN 2 3 2020	00
→ Filing Fee: \$20.00 → Penalty: Additional \$25.00 fee if form is not filed by July 30.			BY 35105		
1. Entity ID Number	2. Exact name of	· .			
769661	WICKENDEN AREA MERCHANTS ASSOC.				
State of Incorporation	5. Brief description	on of the character	Island	· <del></del>	
<u> </u>	WAMA IS THE MERCHANTS ASSOCIATION FOR				
4. NAICS CODE 313910	BUSINESSES ON OR NEAR WICKENDEN ST.				
6. Principal Office Address		127 BROOK ST.	City	State	Zip
WAMA COCAMPUS	FINE WINES	) 	PROVIDENCE	RI	02906
7. List ALL officers (names and addresses)			Check the box to indicate an attachment		
President Name VINCENT SCORZIELO			Vice-President Name MARIAN CLARIC		
Street Address 103 CARRINGTON AVE-			Street Address 21 UNION ST.		
City PROVIDENCE	State	Zip 02906	CITY WARREN	State R	zip 02885
Secretary Name DAYNA ARONOVITCH			Treasurer Name ED HARDIE		
Street Address 106 GREENWOOD AVE			Street Address 92 A PROSPECT ST.		
city RUMFORD	State R	zip 029/6	city PROVIDENCE	State (2)	Zip 02906
8. List ALL directors (names and addresses). Rt Corporations MUST list at least THREE directors.  Check the box to indicate an attachment					
Director Name VINCENT SCORZIEZLO			Director Name ED HARDIE		
Street Address 133 CARINGTON AVE.			Street Address 92 A PROSPECT ST.		
CITY PROVIDENCE	State	zip 02906	CITY PROVIDENCE	State R1	Zip 02906
Director Name MARIAN CLARK			Director Name		
Street Address 81 UNION ST.			Street Address		
City WARRON	State R1	Zip 02885	City	State	Zıp
9. Registered Agent in Rhode Islan	<del>^</del>	is currently of record	in the Department of State. Changes	require filing Form 64	l.
Under penalty of perjury, I decia			·	ompanying schedu	les and

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

MAIL TO: Division of Business Services

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

Name of Officer/Authorized Representative

Signature of Officer/Authorized Representative

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