



**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:** 2020

**1. Corporate ID No.** 000065048

**2. Name of Corporation** HABITAT FOR HUMANITY OF WEST BAY AND NORTHERN RHODE ISLAND, INC.

**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

624229

**4. Corporate Address in Rhode Island**

No. and Street: 389 GREENWICH AVENUE PO BOX 6743

City or Town: WARWICK

State: RI Zip: 02887 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 BUILD AND RENOVATE HOUSES FOR PEOPLE IN NEED

**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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**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      | AMY GATES MS  | 264 EAST GREENWICH AVENUE<br>WEST WARWICK, RI 02893 USA           |
| TREASURER      | CHRISTOPHER SPAGNOLE MR                               | 266 ROSEMONT AVENUE<br>JOHNSTON, RI 02919 USA                     |
| SECRETARY      | DEBRA STACEY MS                                       | 166 MASSACHUSETTS AVENUE<br>PROVIDENCE, RI 02905 USA              |
| VICE PRESIDENT | RICHARD MASNYK JR                                     | 621 POUND HILL ROAD #103<br>NORTH SMITHFIELD, RI 02896 USA        |
| DIRECTOR       | EARL MARSH MR   | 9 COOK ROAD<br>CUMBERLAND, RI 02864 USA                           |
| DIRECTOR       | KELLY MCCALLISTER MR                                  | 15 GAZZA ROAD<br>CHEPACHET, RI 02814 USA                          |
| DIRECTOR       | CLAUDIA ROCHA MRS                                     | 35 JENNA WAY<br>CUMBERLAND, RI 02864 USA                          |
| DIRECTOR       | GEORGE GIFFORD MR                                     | 4096 MENDON ROAD<br>CUMBERLAND, RI 02864 USA                      |
| DIRECTOR       | GARY LEFRANCOIS MR                                    | 6 JENNINGS AVENUE APT. A<br>CRANSTON, RI 02920 USA                |
| DIRECTOR       | LOUISE CARRIERE                                       | 1 TANGLEWOOD ROAD<br>NORTH SMITHFIELD, RI 02896 USA               |
| DIRECTOR       | CRYSTAL RAVIELE                                       | 67 FAIRWAY DRIVE<br>ATTLEBORO, MA 02703 USA                       |
| DIRECTOR       | PHILIP TORRENCE                                       | 79 ALL HALLOWS ROAD<br>DANIELSON, CT 06239                        |

**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**

DEBRA J. STACEY 166 MASSACHUSETTS AVENUE PROVIDENCE , RI 02905

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

**Signed this 12 Day of July, 2020 at 6:42:58 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 DEBRA STACEY  
Signature of Authorized Person

