



State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2020

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.

FILED *02*
MAR 05 2021
2021

1. Entity ID Number 93058		2. Exact name of the Corporation West Bay Korean War Veterans Assn. of RI, Inc, Chapter 2			
3. State of Incorporation Rhode Island		5. Brief description of the character of business conducted in Rhode Island To promote and maintain for benevolent and charitable purposes.			
4. NAICS Code 813319 - Other Social Advoca					
6. Principal Office Address 190 Fairway Drive			City Coventry	State RI	Zip 02816
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Henry DeGraide			Vice-President Name William Kennedy		
Street Address 206 Hill Street			Street Address 13 Clarke Road		
City Coventry	State RI	Zip 02816	City Coventry	State RI	Zip 02816
Secretary Name Edward Ruzzano			Treasurer Name Edward Ruzzano		
Street Address 190 Fairway Drive			Street Address 190 Fairway Drive		
City Coventry	State RI	Zip 02816	City Coventry	State RI	Zip 02816
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment <input type="checkbox"/>					
Director Name William Bowen			Director Name Roland Gravier		
Street Address 500 Swansea Mall Drive, #126B			Street Address 588 Weaver Hill Road		
City Swansea	State MA	Zip 02777	City West Greenwich	State RI	Zip 02817
Director Name Cyril Geary			Director Name Deceased		
Street Address 114 MacArthur Blvd.			Street Address		
City Coventry	State RI	Zip 02816	City	State	Zip
9. The Registered Agent information of record with the RI Department of State is accurate. 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.					
<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 Edward Ruzzano				Date March 2, 2021	
Signature of Officer/Authorized Representative <i>Edward Ruzzano</i>					

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