



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year:

Non-Profit Corporation

2021

→ Filing period: June 1 - June 30

→ Filing Fee: \$20.00

→ Penalty: Additional \$25.00 fee if form is not filed by July 30.

FILED

JUL 02 2021

9421

STAFF

1. Entity ID Number 110662		2. Exact name of the Corporation W.Y.S.A.	
3. State of Incorporation Rhode Island		5. Brief description of the character of business conducted in Rhode Island To operate a Soccer Association for the benefit of the Woonsocket area children of the State of Rhode Island	
4. NAICS Code 611620			
6. Principal Office Address 250 Eddie Dowling Hwy.		City No. Smithfield	State RI Zip 02896
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
President Name RICHARD G AUGER		Vice-President Name MARC BADEAU	
Street Address 85 PROSPECT ST		Street Address 127 ATLANTA AVE	
City WOONSOCKET	State RI	City WOONSOCKET	State RI
Zip 02895		Zip 02895	
Secretary Name MARC TOUPIN		Treasurer Name RICHARD G AUGER	
Street Address 49 JENKS ST		Street Address 85 PROSPECT ST	
City WOONSOCKET	State RI	City WOONSOCKET	State RI
Zip 02895		Zip 02895	
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 RICHARD G AUGER		Director Name PAUL MARTIN	
Street Address 85 PROSPECT ST		Street Address 145 BENNETT	
City WOONSOCKET	State RI	City WOONSOCKET	State RI
Zip 02895		Zip 02895	
Director Name MARC TOUPIN		Director Name	
Street Address 49 JENKS ST		Street Address	
City WOONSOCKET	State RI	City	State
Zip 02895		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.			
<small>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.</small>			
Name of Officer/Authorized Representative Richard G Auger			Date 6-28-21
Signature of Officer/Authorized Representative RICHARD G AUGER			

MAIL TO:

Division of Business Services

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