



**State of Rhode Island  
Office of the Secretary of State**

No Fee

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

**Domestic Non-Profit  
Annual Report - Amended**

(Section 7-1.2-1501(e) of the General Laws of Rhode Island, 1956, as amended)

**This form is only to be used to amend the current annual report on file with this office.**

**ANNUAL REPORT YEAR:** 2021

**1. Corporate ID No.** 001694942

**2. Name of Corporation** Operation Pawsibility Project

**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

115210

**3. State of Incorporation**

State: RI

**4. Corporate Address in Rhode Island**

No. and Street: 3970 POST RD

City or Town: WARWICK State: RI Zip: 02886 Country: USA

**6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island**

TO HELP HOMELESS ANIMALS FIND THEIR FOREVER HOME WITH PROPER VETTING AND TRAINING

**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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**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*

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
VICE PRESIDENT, DIRECTOR	ERICA MCCARTNEY	45 MOUNTAIN AVE RIVERSIDE, RI 02915 USA

PRESIDENT, DIRECTOR	MAUREEN SALZILLO	7 YORK ROAD JOHNSTON, RI 02919 USA
OTHER OFFICER	OPERATION PAWSIBILITY PROJECT	3970 POST RD
DIRECTOR	MARK REES	1 HANABEA LN NANTUCKET, MA 02554 USA

**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**

MAUREEN SALZILLO 3970 POST ROAD WARWICK , RI 02886

**Signed this 17 Day of November, 2021 at 10:26:09 AM 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 MAUREEN SALZILLO  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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State of Rhode Island  
**Department of State | Office of the Secretary of State**  
**Nellie M. Gorbea**, *Secretary of State*

I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island,  
hereby certify that this document, duly executed in accordance with the provisions  
of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this  
office on this day:

November 17, 2021 10:26 AM

A handwritten signature in blue ink, appearing to read "Nellie M. Gorbea".

Nellie M. Gorbea  
*Secretary of State*

