



**State of Rhode Island
Department of State - Business Services Division**

RECD RIDDOS BSD
24 JAN 5 PM 2:24:30

Annual Report for the year: 2024

Non-Profit Corporation

- Filing period: February 1 - May 1
- Filing Fee: \$20.00
- Penalty: Additional \$25.00 fee if form is not filed by May 31.

| | | | | |
|---|--|---------------------------|--------------------|---------------------|
| 1. Entity ID Number 148791 | 2. Exact name of the Corporation Woonsocket Cat Sanctuary Inc. | | | |
| 3. State of Incorporation Rhode Island | 5. Brief description of the character of business conducted in Rhode Island Non-Kill Cat Shelter | | | |
| 4. NAICS Code 812910 | | | | |
| 6. Principal Office Address 266 Mendon Road | | City Woonsocket | State RI | Zip 02895 |

7. List ALL officers (names and addresses) Check the box to indicate an attachment

| | | | | | |
|---|-----------------|------------------|--|-----------------|------------------|
| President Name Paulette Tessier | | | Vice-President Name Deborah Adam | | |
| Street Address 1260 38th. Avenue | | | Street Address 80 Blackstone Street | | |
| City St. Petersburg | State FL | Zip 33704 | City Blackstone | State MA | Zip 01504 |
| Secretary Name Gail Desmarais | | | Treasurer Name Gail Desmarais | | |
| Street Address 140 Linden Avenue | | | Street Address 140 Linden Avenue | | |
| City Woonsocket | State RI | Zip 02895 | City Woonsocket | State RI | Zip 02895 |

8. List ALL directors (names and addresses). RI Corporations **MUST** list at least **THREE** directors. Check the box to indicate an attachment

| | | | | | |
|---|-----------------|------------------|--|-----------------|------------------|
| Director Name Paulette Tessier | | | Director Name Deborah Adam | | |
| Street Address 1260 38th. Avenue | | | Street Address 80 Blackstone Street | | |
| City St. Petersburg | State FL | Zip 33704 | City Blackstone | State MA | Zip 01504 |
| Director Name Gail Desmarais | | | Director Name | | |
| Street Address 140 Linden Avenue | | | Street Address | | |
| City Woonsocket | State RI | Zip 02895 | 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.

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

| | |
|---|------------------------------------|
| Name of Officer/Authorized Representative Deborah Adam | Date 12/29/23 |
| Signature of Officer/Authorized Representative <i>Deborah Adam</i> | FILED JAN 05 2024 |

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

BY E6SNR 2:26
*C