RI SOS Filing Number: 202447446010 Date: 2/26/2024 4:00:00 PM

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

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.

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Penalty. Additional \$25 00 fee if					<u>-</u> -		
1. Entity ID Number	2. Exact name of the Corporation						
541080	Wilcox East Neighborhood Association, Inc.						
3. State of Incorporation	Brief description of the character of business conducted in Rhode Island						
RI	To promote the general welfare of the Wilcox East neighborhood.						
4. NAICS Code							
813319							
6. Principal Office Address			City	State	Zip		
4 Vose Street			Westerly	RI	02891		
7. List ALL officers (names and addresses) Check the box to indicate an attachment							
President Name Jean Gagnier			Vice-President Name Joseph Wagner				
Street Address 6 Narragansett Ave.			Street Address 4 Vose Street				
^{City} Westerly	State RI	^{Zıp} 02891	City Westerly	State R1	Zip 02891		
Secretary Name Anthony J. Clancy		Treasurer Name Frederick C. Eckel, Jr.					
Street Address 11 Vose Street		Street Address 41 Grove Ave.					
^{City} Westerly	State RI	^{Zıp} 02891	^{City} Westerly	State RI	<i>Σ</i> ₁₀ 02891		
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment							
Director Name Joseph Wagner			Director Name J.E. Tarallo				
Street Address 4 Vose Street			Street Address 19 Narragansett Ave.				
^{City} Westerly	State RI	^{Zip} 02891	^{City} Westerly	State RI	Zip 02891		
Director Name Anthony Clancy			Director Name Frederick C. Eckel, Jr.				
Street Address 11 Vose Street			Street Address 41 Grove Ave.				
^{City} Westerly	State RI	^{Zip} 02891	Cily Westerly	State RI	Zip 02891		
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			Date				
FREDERIUC C. Eckol, JR, TRAUSUREL 2/19/24					24		
FREDERIUC C. Ecko I JR TREUSUREN 2/19/24 Signature of Officer/Authorized Representative TREUSUREN TREUSUREN TREUSUREN							

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov Directors Attachment for Annual Report 2024 Wilcox East Neighborhood Association, Inc. 541080

Jack Armstrong 24 Spruce Street Westerly, RI 02891

Gail Armstrong 24 Spruce Street Westerly, RI 02891

Jean Gagnier 6 Narragansett Ave. Westerly, RI 02891