



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

Fee: \$20.00

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

**Non-Profit Corporation  
Annual Report**

Filing Period: February 1 - May 1

*In accordance with R.I.G.L. 7-6-94, each corporation failing or refusing to file its annual report within the time prescribed by law (R.I.G.L. 7-6-91) is subject to a penalty fee of \$25.00.*

**ANNUAL REPORT YEAR - ENTER THE CURRENT YEAR 2024:** 2024

**1. Corporate ID No.** 000065048

**2. Name of Corporation** HABITAT FOR HUMANITY OF WEST BAY AND NORTHERN RHODE ISLAND, INC.

**3. State of Incorporation**

State: RI

**NAICS CODE**

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

624229

**4. Principal Office Address**

No. and Street: 166 MASSACHUSETTS AVENUE

P.O. BOX 6743

City or Town: PROVIDENCE

State: RI Zip: 02905 Country: USA

**5. Brief Description of the Character of the Affairs Conducted in Rhode Island**

TO BUILD AND RENOVATE HOUSES FOR PEOPLE IN NEED

**6. Names and Addresses of the Officers and Directors:**

**All Directors and Officers must be listed individually. The number of DIRECTORS of a Rhode Island Corporation shall not be less than 3.**

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
TREASURER	CHRISTOPHER SPAGNOLE MR	266 ROSEMONT AVENUE JOHNSTON, RI 02919 USA
SECRETARY	DEBRA STACEY MS	166 MASSACHUSETTS AVENUE PROVIDENCE, RI 02905 USA
PRESIDENT	RICHARD J MASNYK JR	52 LINWOOD AVENUE WHITINSVILLE, MA 01588 USA
VICE PRESIDENT	GEORGE GIFFORD	4096 MENDON ROAD CUMBERLAND, RI 02864 US
EXECUTIVE DIRECTOR	LINDA PLAYS	99 ALLEN ST #202 WOONSOCKET, RI 02895 USA
DIRECTOR	EARL MARSH MR	9 COOK ROAD CUMBERLAND, RI 02864 USA
DIRECTOR	KELLY MCCALLISTER MR	15 GAZZA ROAD CHEPACHET, RI 02814 USA
DIRECTOR	CLAUDIA ROCHA MRS	35 JENNA WAY CUMBERLAND, RI 02864 USA
DIRECTOR	GEORGE GIFFORD MR	4096 MENDON ROAD CUMBERLAND, RI 02864 USA
DIRECTOR	GARY LEFRANCOIS MR	6 JENNINGS AVENUE APT. A CRANSTON, RI 02920 USA
DIRECTOR	LOUISE CARRIERE	1 TANGLEWOOD ROAD NORTH SMITHFIELD, RI 02896 USA
DIRECTOR	CRYSTAL RAVIELE	67 FAIRWAY DRIVE ATTLEBORO, MA 02703 USA
DIRECTOR	DAMON ARPIN	21 MELBOURNE RD WARWICK, RI 02886 USA

**7. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER**  
Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78

DEBRA J. STACEY 166 MASSACHUSETTS AVENUE PROVIDENCE , RI 02905

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

**Signed this 16 Day of April, 2024 at 8:20:47 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 DEBRA STACEY  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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