	State of Rhode Island Fee: \$20.0 Office of the Secretary of State
	Division Of Business Services
	148 W. River Street
	Providence RI 02904-2615
7636	(401) 222-3040
Non-Profit Corpo Annual Report Filing Period: Februa	
	R.I.G.L. 7-6-94, each corporation failing or refusing to file its the time prescribed by law (R.I.G.L. 7-6-91) is subject to a 00.
ANNUAL REPORT	YEAR - ENTER THE CURRENT YEAR 2025: 2025
1. Corporate ID No	<b>b.</b> <u>000419780</u>
2. Name of Corpor	ration West Warwick Angels Caring for Animals, Inc.
3. State of Incorpo	pration
State: <u>RI</u>	
	NAICS CODE
primary type of acti populate a NAICS (	n labeled NAICS Code below, select the classification title that describes the ivity in which your entity engages. The box to the right of the dropdown will Code based on the chosen selection. If the NAICS Code is known, enter it into the or further assistance with selecting a classification <u>click here.</u>
NAICS Code	
<u>813219</u>	
4. Principal Office	Address
No. and Street:	112 HARDING STREET
City or Town:	WEST WARWICKState: RIZip: 02893Country: USA
5. Brief Description	n of the Character of the Affairs Conducted in Rhode Island
RESIDING AT TH EXCLUSIVELY H DISTRIBITION T 6. Names and Add All Directors and 0	EY FOR THE MEDICAL CARE AND WELFARE OF ANIMALS HE ANIMAL SHELTER LOCATED IN WEST WARWICK RHODE ISLAND FOR CHARITABLE PURPOSES INCLUDING THE MAKING AND TO ORGANIZATIONS THAT QUALIFY AS EXEMPT ORGAINZATIONS resses of the Officers and Directors:
	a shall not be less than 3.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
TREASURER	JOAN C LEVITT	11 HARVARD CT CRANSTON, RI 02920 USA
PRESIDENT	KIMBERLY MCDONOUGH	98 MAYBURY STREET CUMBERLAND, RI 02864 USA
DIRECTOR	LINDA ELIZABETH ROBBINS	565 SOUTH FRONTAGE RD DANIELSON, CT 06239 USA
DIRECTOR	TODD CARLSON	17 HOLMES RD COVENTRY, RI 02816 USA
DIRECTOR	ELIZABETH KELLY	6 WEATHERVANE WAY WESTERLY, RI 02891 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

JOAN C. LEVITT 112 HARDING STREET WEST WARWICK , RI 02893

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

## Signed this 12 Day of February, 2025 at 11:05:02 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 JOAN C. LEVITT

Signature of Authorized Person

Form No. 631 Revised 09/07

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