



State of Rhode Island
Department of State - Business Services Division

Annual Report for the year.
Non-Profit Corporation

- Filing period: June 1 - June 30
- Filing Fee: \$20.00
- Penalty: Additional \$25.00 fee if form is not filed by July 30.

FILED
 OCT 21 2021
 132053

1. Entity ID Number 28871		2. Exact name of the Corporation PHI CORPORATION OF SIGMA KAPPA			
3. State of Incorporation RHODE ISLAND		5. Brief description of the character of business conducted in Rhode Island A NON PROFIT HOUSING CORPORATION PROVIDING HOUSING			
4. NAICS Code 813990					
6. Principal Office Address 16 FRATERNITY CIRCLE URI			City KINGSTON	State RI	Zip 02881
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name SEE ATTACHED			Vice-President Name SEE ATTACHED		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Secretary Name SEE ATTACHED			Treasurer Name SEE ATTACHED		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment <input type="checkbox"/>					
Director Name SEE ATTACHED			Director Name SEE ATTACHED		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name SEE ATTACHED			Director Name SEE ATTACHED		
Street Address			Street Address		
City	State	Zip	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.					
<small>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee</small>					
Name of Officer/Authorized Representative CASEY KELLER				Date 10/11/21	
Signature of Officer/Authorized Representative 					

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

PHI CORPORATION OF SIGMA KAPPA
ENTITY ID: 28871

FORM RI-631, LINE 7 & 8
LIST OF OFFICERS AND DIRECTORS

OFFICERS	TITLE	ADDRESS
SUSAN WILLIS	PRESIDENT	695 PRO MED LANE, SUITE 300 CARMEL, IN 46032
JULIE NAPPER	VP FINANCE	695 PRO MED LANE, SUITE 300 CARMEL, IN 46032
SARA HARVEY	VP HOUSING OPERATIONS	695 PRO MED LANE, SUITE 300 CARMEL, IN 46032
EMILY SHEPARD	VP PROGRAMMING	695 PRO MED LANE, SUITE 300 CARMEL, IN 46032
ANN-MARIE FONTAINE	VP PROPERTY MANAGEMENT	695 PRO MED LANE, SUITE 300 CARMEL, IN 46032
ERICA TABANO	VP COMMUNICATION	695 PRO MED LANE, SUITE 300 CARMEL, IN 46032
JENNIFER RAINEY	NAT'L CHAPTER VP FINANCE	695 PRO MED LANE, SUITE 300 CARMEL, IN 46032
CASEY KELLER	EXECUTIVE DIRECTOR	695 PRO MED LANE, SUITE 300 CARMEL, IN 46032