

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street Providence, RI 02904-2615

401.222.3010

## 2009 PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

Filing Period: January 1 - March 1 • Filing Fee: \$50.00\* • THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.

In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(e\sigma'd)) is

subject to a penalty fee of \$2					
1. Corporate ID No. 119776	2. Name of Corf Cathedral I	Development Group, Inc.			
3. Street Address Principal Business Office 5 Cathedral Square			Providence	RI	<sup>Zip</sup> <b>02903</b>
4. Business Phone No		5. State of Incorporation Rhode Island			
TO PURCHASE, OV REHABII ITATE AND 7. NAMES AND ADDI	baracter of Business Condu VN, DEVELOP, OPER CORRESPONDED HOUS RESSES OF THE OFF	tot in khode Island RATE, MANAGE AND SELI ING DEVEL "POWENTS APT CERS: "("X" "POWENTS APT	L HOUSING DEVELOPM ACHMENT)   FILL IN S	ENTS OF ALL TYPES; T	TO CONSTRUCT, ATTACHMENTS
Robert R. Gaudreau, Jr.			Arthur Kramer		
Street Address 5 Cathedral Square			Street Address 5 Cathedral Square		
City Providence	State RI	<sup>Zip</sup> 02903	City Providence	State RI	<sup>Zip</sup> 0 <b>2903</b>
Secretary Name Scott Gaudreau			Treasurer Name Scott Gaudreau		
Street Address 5 Cathedral Square			Street Address 5 Cathedral Square		
City Providence	State RI	7 <i>ip</i> 02903	City Providence	State RI	Zip 02903
8. NAMES AND ADD	l l	ECTORS: ("X" BOX FOR A	: TTACHMENT) [] FILL IT	N SPACES BEFORE USIN	1 *
Director Name			Director Name		3
Street Address			Street Address	Street Address	
City	State	Zip	City:	State	7.17 U
Director Name			Director Name		
Street Address			Street Address		
СНу	State	Zip	City	State	24 m
9. SHARES AUTHOR	IZED	l		 	
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.			Number of Shares	Class Series	Par Value
			100	Common	No/0
This report must be e	executed on behalf of	he corporation by an author	ized representative. If the	corporation is in the hanc	ds of a receiver or trustee,
this report must be ex	xecuted on behalf of the	ne corporation by the receive	er or trustee.		
			including any acc	ompanying schedules and st	that I have examined this repo atoments, and that all stateme
FIL	ED		contained herein	are true and correct.	2 Jug 109
File Date JAN 0 9	2009		Signature		Date
Check By	071		Print or Type Nan	<u> R. Gaudreau</u>	116
Ву:			Preside	ct	
FOR SECRETA	RY OF STATE USE ONLY		Title		Form 630 Rev 08/08