

77024

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street

Providence, RI 02904-2615

401.222.3040

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2010

401.2

Filing Period: June 1 - June 30 • Filing Fee: \$20.00* • THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.

* 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.			1	(101.0)	2. 7 0 71) is subject to a	
1. Corporate ID No.	2. Name of Co	2. Name of Corporation				
72024	Anthony H	Anthony House Housing Corporation				
3. State of Incorporation		4. Corporate address in Rhode Island - Street Address City Zip				
RHODE ISLAND	50 Washir	ngton Square		Newport	02840	
5. Foreign corporation. Enter principal office address			City	State	Zψ	
					-7	
6. Brief Description of the chara	cter of the affairs wh	tch are actually conducted in I	thode Island			
Providing lower income	elderly & handid	apped person with desc	ent, affordable housing facil	lities		
			-			
7. NAMES AND ADDRES	SSES OF THE OF	FFICERS: ("X" BOX FOR A	<i>ITTACHMENT)</i>	ACES BEFORE USING AT	TACHMENTS	
President Name			Vice President Name			
Robert M. Sabel			Robert M. Sabel			
Street Address			Street Address			
50 Washington Square			50 Washington Square			
City	State	Zip	City	State	Zip	
Newport	RI	02840	Newport	RI	02840	
Secretary Name			Treasurer Name			
Marjorie E. Jensen			Charlotte A. Yeomans			
Street Address			Street Address			
50 Washington Square			50 Washington Square			
City	State	Zip	City	State	Zip	
Newport	Ri	02840	Newport	Ri	02840	
o. Names and Addres	SES OF THE DI	RECTORS: ("X" BOX FOR	ATTACHMENT) FILL IN SE	PACES BEFORE USING AT	FACHMENTS	
THE NUMBER OF DIRECTORY Director Name	CTORS OF A DO	MESTIC (RHODE ISLA	ND) CORPORATION SHAL	<u>L NOT BE LESS THAN TH</u>	REE (3). R.I.G.L. 7-6-23	
Director Name			Director Name			
Stephen P. Ostiguy Street Address			Jan DiRuzzo			
***************************************			Street Address			
50 Washington Square			50 Washington Square			
City	State	Zip	City	State	Zip	
Newport	RI	02840	Newport	RI	02840	
Director Name			Director Name			
Charlotte A. Yeomans			Robert M. Sabel			
Street Address			Street Address			
50 Washington Square			50 Washington Square			
City	State	Zip	City	State	Zip	
Newport	RI	02840	Newport	RI	02840	
9. REGISTERED AGENT I	N RHOĐE ISLA	ND		•	,	
This information is current	ly of record in the	e Office of the Secretary o	of State. Changes require filing	of Paris (A) Digital	10 m . m	
This report m	ust be signed by	either the President, Vic-	e President, Secretary, Assist	ant Secretary, Treasurer. Re	eceiver or Trustee	
				-,		

Order penalty of penury, I decrare and affirm that I have examined this
report, including any accompanying schedules and statements, and that all statements continued herein are true and forrect. Signaphre of Officer Robert M. Salpel
Print or Type Name of Officer
President
Title of Officer