

A. Ralph Mollis, Secretary of Sta Corporations Divisio 148 W. River Stre

Providence, RI 02904-26; 401.222.30-

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 20 1 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. 859 74 1. Corporate ID No. 2. Name of Corporation BUSE Homes INC 3. State of Incorporation Corporate address in Rhode Island - Street Address MASSACHUSETS ICTOA W.GATTHWIEH 02817 5. Foreign corporation. Enter principal office address Citv State 5. Brief Description of the character of the affairs which are actually conducted in Rhode Island PROVIDE ASSISTANCE FOR Prophe AT RISK 7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) [ FILL IN SPACES BEFORE USING ATTACHMENTS Vice President Name RI 02817 WGT G 02817 Secretary Name MARAL THOMAS 426 MOUNT HOPE 57 State MA 02760 W.Cr. 8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) TILL IN SPACES BEFORE USING ATTACHMENTS THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23 Director Name Director Name MARAL Street Address 02811 Zip 02760 RJ W.CA Director Name Director Name LAWRENC Street Address City State 7ih 9. REGISTERED AGENT IN RHODE ISLAND This information is currently of record in the Office of the Secretary of State. Changes require filing of Form 641 - R.I.G.L. 7-6-13/7-6-78 This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

FILED	Under penalty of perjury, I declare and affirm that I have examined thi
JUN 28 2011	report, including any accompanying schedules and statements, and that all statements obtained berein are true and correct.
Check No. Ry 1036	Signature of Officer Place
3y:	Print or Type Name of Officer
FOR SECRETARY OF STATE USE ONLY	Title of Officer Form 631 Rev. 09/17