



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

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 2011

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. Corporate ID No. 93260		2. Name of Corporation V.N. HOUSING CORP.			
3. State of Incorporation RHODE ISLAND		4. Corporate address in Rhode Island - Street Address 50 WASHINGTON SQUARE		City NEWPORT	Zip 02840
5. Foreign corporation. Enter principal office address				City	State
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island To provide disabled or elderly persons with housing facilities					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name PAUL MURPHY			Vice President Name ROBERT M. SABEL		
Street Address 50 WASHINGTON SQUARE			Street Address 50 WASHINGTON SQUARE		
City NEWPORT	State RHODE ISLAND	Zip 02840	City NEWPORT	State RHODE ISLAND	Zip 02840
Secretary Name PATRICIA SARGENT			Treasurer Name		
Street Address 50 WASHINGTON SQUARE			Street Address		
City NEWPORT	State RHODE ISLAND	Zip 02840	City	State	Zip
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL 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 PAUL MURPHY			Director Name ROBERT M. SABEL		
Street Address 50 WASHINGTON SQUARE			Street Address 50 WASHINGTON SQUARE		
City NEWPORT	State RHODE ISLAND	Zip 02840	City NEWPORT	State RHODE ISLAND	Zip 02840
Director Name PATRICIA SARGENT			Director Name CHARLOTTE A. YEOMANS		
Street Address 50 WASHINGTON SQUARE			Street Address 50 WASHINGTON SQUARE		
City NEWPORT	State RHODE ISLAND	Zip 02840	City NEWPORT	State RHODE ISLAND	Zip 02840
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

93260
FILED

File Date JUL 08 2011
Check No _____
By: RV [Signature]
FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including my accompanying schedules and statements, and that all statements contained herein are true and correct.

[Signature] Date _____
Signature of Officer
ROBERT M. SABEL
Print or Type Name of Officer
VICE-PRESIDENT
Title of Officer