

1. Entity ID No.

## STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State - Division of Business Services

148 W. River Street, Providence. Rhode Island 02904-2615

Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

## NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2011

Filing Period: June 1 - June 30 · This report must be typed or printed legibly.

Filing Fee: \$20.00 · FAILURE TO FILE THIS REPORT BY JULY 30 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No.		2. Exact name of the Corporation						
27982	GRACE	CHURCH HOUSIN	IG CORPORATI	ON				
3. State of Incorporation RHODE ISLAND	•	4. Corporate Address in RI - Street Address 280 WASHINGTON STREET			City PROVIDENCE		Zip <b>02903</b>	
5. Foreign corporation. Enter principal office address			City		State	Zip		
6. Brief description of the c RENTAL OF APART				NDER HUD'S	SECTION 8 PF	ROGRAM.		
AND THE REPORT OF THE STATE OF				- W				
President Name KENNETH R. BURNETT			Vice-President Name TIMOTHY T. MORE					
Street Address C/O BANKNEWPOR	Street Address 50 SOUTH MAIN STREET							
City NEWPORT	State RI	Zip <b>02840</b>	City PROVIDENCE		State <b>RI</b>	Zip <b>02903</b>		
Secretary Name GORDON E. MARTIN			Treasurer Name CHARLES SMITH, III					
Street Address 405 DIAMOND HILL ROAD			Street Address 111 BLACKSTONE BLVD.					
City WARWICK	State RI	Zip <b>02886</b>	City PROVIDENCE		State RI	Zip ≥ 02906	RPO	
			XV.				eccasion s	
Director Name GORDON E. MARTIN			Director Name POLLY TALBOTTS				SNO 3	
Street Address 405 DIAMOND HILL ROAD			Street Address 204 GOVERNOR STREET #d   STATEMENT OF THE PROPERTY OF THE PROPE					
City WARWICK	State RI	Zip <b>02886</b>	City PROVIDE	NCE	State RI	Zip <b>02906</b>	141	
Director Name W. SPENCER HARBER			Director Name KENNETH R. BURNETT					
Street Address 76 BLOOM STREET			Street Address C/O BANKNEWPORT P.O. BOX 450					
City WARWICK	State RI	Zip <b>02889</b>	City NEWPOR	Т	State RI	1		
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This information is curre	*							
This report mu	ist be signed by eithe	er the President, Vice-F	President, Secretary,	Assistant Secretar	ry, Treasurer. Rece	eiver or Trustee		

Form No. 631 Revised: 01/2012

**FILED** APR 26 2012 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.

Signature of Officer

KENNETH R. BURNETT

Print or Type Name of Officer

PRESIDENT

Title of Officer

#27982 - GRACE CHURCH HOUSING CORPORATION

**ADDITIONAL DIRECTORS:** 

**TIMOTHY T. MORE** 

**50 SOUTH MAIN STREET** 

PROVIDENCE, RI 02903

CHARLES SMITH, III

111 BLACKSTONE BLVD.

PROVIDENCE, RI 02906



## STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

I, A. RALPH MOLLIS, Secretary of State of the State of Rhode Island and Providence Plantations, hereby certify that this document, duly executed in accordance with the provisions of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this office on this day:

A. RALPH MOLLIS

A. Japa 1. eeio

Secretary of State

