



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 **2014**

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. 97555		2. Exact name of the Corporation Housing Partners for Positive Living, Inc.			
3. State of Incorporation RHODE ISLAND		4. Brief description of the character of business conducted in Rhode Island LOW INCOME HOUSING FOR PERSONS WITH MENTAL ILLNESS			
5. Principal office address 800 Clinton Street, Suite 301, PO Box 1700		City Woonsocket	State RI	Zip 02895	
6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>					
President Name CHRISTIAN L. STEPHENS		Vice-President Name NONE			
Street Address C/O NRI COMMUNITY SERVICES, INC., PO BOX 1700		Street Address			
City WOONSOCKET	State RI	Zip 02895	City	State	Zip
Secretary Name MARIANNE GRONDOLSKI		Treasurer Name ROLAND M. BOUCHER			
Street Address 10 BETTY STREET		Street Address 273 GREAT ROAD			
City LINCOLN	State RI	Zip 02865	City NORTH SMITHFIELD	State RI	Zip 02896
7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>					
Director Name MARIANNE GRONDOLSKI		Director Name ROLAND M. BOUCHER			
Street Address 10 BETTY STREET		Street Address 273 GREAT ROAD			
City LINCOLN	State RI	Zip 02865	City NORTH SMITHFIELD	State RI	Zip 02896
Director Name FELICE DESMARAIS		Director Name JOSEPH F. GARLICK, JR.			
Street Address 42 DESROCHERS AVENUE		Street Address 119 BAYARD STREET			
City WOONSOCKET	State RI	Zip 02895	City PROVIDENCE	State RI	Zip 02906
8. REGISTERED AGENT IN RHODE ISLAND					
This information is currently of record in the Office of the Secretary of State. Changes require filing Form 641.					

This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee

FILED

JUN 23 2014
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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.

File Date _____
 Check No _____
 By: _____ **BY** _____

Signature of Officer or Authorized Representative _____ Date **6/19/14**

FOR SECRETARY OF STATE USE ONLY

CHRISTIAN L. STEPHENS, PRESIDENT

Print or Type Name of Officer or Authorized Representative

HOUSING PARTNERS FOR POSITIVE LIVING, INC.

#97555

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6. Officers (cont'd.)

Felice Desmarais

Chair

42 Desrochers Avenue
Woonsocket, RI 02895

7. Directors (cont'd.)

Paul M. Dumouchel
12 Rogler Farm Road
Smithfield, RI 02917

Christine Gadbois
155 Davis Street
Seekonk, MA 02771

Judy Barry
47 Sunrise Terrace
Chepachet, RI 02814

Christopher V. Carcifero
111 Pinecrest Drive
Woonsocket, RI 02895

Debra A. Hawes
588 Newport Ave., Unit B
So. Attleboro, MA 02703

Daniel J. Kubas-Meyer
40 Centennial Avenue
Barrington, RI 02806

Benedict F. Lessing, Jr.
40 Dimond Avenue
Bristol, RI 02809

NON-VOTING MEMBER

Christian L. Stephens
NRI Community Services, Inc.
PO Box 1700
Woonsocket, RI 02895