



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/business

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR **2015**

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. 66380		2. Exact name of the Corporation Sacred Heart Housing Corporation			
3. State of Incorporation Rhode Island		4. Brief description of the character of business conducted in Rhode Island To provide subsidized housing for senior citizens and disabled persons			
5. Principal office address 845 Wakefield Street		City West Warwick		State RI	Zip 02893
6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) ☐					
President Name Giuseppe Lancellotta		Vice-President Name Sandra Reddy			
Street Address 91 Quaker Drive		Street Address 46 Cliffside Drive			
City West Warwick	State RI	Zip 02893	City Cranston	State RI	Zip 02920
Secretary Name Frances Gallo		Treasurer Name Mark Brunero			
Street Address 13 Maywood Drive		Street Address 49 Division Road			
City West Warwick	State RI	Zip 02893	City West Greenwich	State RI	Zip 02817
7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) ☒					
Director Name Giuseppe Lancellotta		Director Name Sandra Reddy			
Street Address 91 Quaker Drive		Street Address 46 Cliffside Drive			
City West Warwick	State RI	Zip 02893	City Cranston	State RI	Zip 02920
Director Name Mark Brunero		Director Name Frances Gallo			
Street Address 49 Division Road		Street Address 13 Maywood Drive			
City West Greenwich	State RI	Zip 02817	City West Warwick	State RI	Zip 02893
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, Receiver or Trustee

File Date _____

Check No _____

By: _____

FOR SECRETARY OF STATE USE BY 327

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JUL 02 2015

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

Date

Giuseppe Lancellotta

Print or Type Name of Officer

President

Title of Officer

ATTACHMENT

To

SACRED HEART HOUSING CORPORATION

2015 ANNUAL REPORT

Additional Directors under Section 8:

<u>Name</u>	<u>Address</u>
Marianna Marsocci	42 Pontiac Street, Warwick, RI 02886
James Prata	1047 Main Ave., Warwick, RI 02886
Betty Brunero	825 Wakefield Street, #308, West Warwick, RI 02893
Father Michael A. Colello	1098 Pawtucvket Avenue, Rumford, RI 02916

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BY 66380