

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

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2016

Filing Period: January 1 - March 1 • This report must be typed or printed legibly.

1. Entity ID No.		me of the Corporation		TELLINIA PERIOR I EN		
97690	Afforda	Affordable Housing Strategies, Inc.				
3. Principal office address 5 Cathedral Square			City Providence	State RI	Zip 02903	
4. Business Phone No. 401-521-3538			5. State of Incorporation Rhode Island			
•		s conducted in Rhode Islan ate, manage and sell		nents of all types		
7. LIST ALL OFFICERS President Name	(NAMES AND ADDI	RESSES) ("X" BOX FOR A	TTACHMENT) Vice-President Name			
Robert R. Gaudreau, Jr.			Arthur Kramer			
Street Address 5 Cathedral Square			Street Address 5 Cathedral Square			
City Providence	State RI	Zip 02903	City Providence	State RI	Zip 02903	
Secretary Name Scott Gaudreau			Treasurer Name Scott Gaudreau			
Street Address 5 Cathedral Square			Street Address 5 Cathedral Square			
City Providence	State RI	Zip 02903	City Providence	State RI	Zip 02909 RPC	
	S (NAMES AND ADI	PRESSES) ("X" BOX FOR			1 70	
Director Name			Director Name		8 1	
Street Address			Street Address			
City	State	Zip	City	State	Zip 32 <	
Director Name	<u>.</u>		Director Name	•		
Street Address			Street Address			
City	State	Zip	City	State	Zip	
9. SHARES AUTHORIZE	D		10. SHARES ISSUED	("X" BOX FOR ATTACI	HMENT)	
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	
			8,000	Common	No Par	
This report must be execu		corporation by an authorize st be executed on behalf of	the corporation by the re	eceiver or trustee.		
File Date	11.3	11660	this report, includir		rm that I have examined chedules and statements re true and correct.	
Check No		JAN 08 2016	SCHO	Mm_	1/8/14	
By:	STATE USE ONLY D	Va244917	Signature of Authori		Date	
	SIAIE USE ONLY D	IMMALL		of Authorized Represent	ative Troosure	
orm No. 630			••	•	→	

Revised: 01/2012