



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

Fee: \$20.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Non-Profit Corporation
Annual Report**

Filing Period: June 1 - June 30

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.

ANNUAL REPORT YEAR: 2016

1. Corporate ID No. 000029237

2. Name of Corporation PUBLIC HOUSING ASSOCIATION OF RHODE ISLAND (PHARI)

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 1035 WEST SHORE ROAD

City or Town: WARWICK

State: RI Zip: 02889 Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street:

City or Town: State: Zip: Country:

6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island

TO PROMOTE DEVELOPMENT AND MANAGEMENT OF LOW INCOME PUBLIC
HOUSING AND ADMINISTRATION OF SECTION 8 HOUSING ASSISTANCE PROGRAMS.

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete

THE NUMBER OF DIRECTORS OF A DOMESTIC(RHODE ISLAND)CORPORATION SHALL NOT BE LESS THAN THREE(3). R.I.G.L. 7-6-23

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	MICHAEL S. LYCKLAND	1035 WEST SHORE ROAD WARWICK, RI 02889 USA
TREASURER	CLAUDETTE KULIGOWSKI	10 FRANKLIN ST. LINCOLN, RI 02865 USA

SECRETARY	DONNA CONWAY	945 CHARLES ST. NORTH PROVIDENCE, RI 02904 USA
VICE PRESIDENT	TINA SULLIVAN	30 WASHINGTON ST. CENTRAL FALLS, RI 02863 USA
DIRECTOR	DAVID M. ARUSSO	8 FORAND CIRCLE JOHNSTON , RI 02919 USA
DIRECTOR	JULIE LEDDY	14 MANCHESTER CIRCLE COVENTRY, RI 02816 USA
DIRECTOR	MICHAEL LYCKLAND	1035 WEST SHORE ROAD WARWICK, RI 02889 USA

8. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78

MICHAEL S. LYCKLAND 1035 WEST SHORE ROAD WARWICK , RI 02889

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

Signed this 27 Day of June, 2016 at 1:13:25 PM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-6.*

By MICHAEL S. LYCKLAND
Signature of Authorized Person

Form No. 631
Revised 09/07

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