



**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.** 000790197

**2. Name of Corporation** Assisted Housing Corporation of Rhode Island

**3. State of Incorporation**

State: RI

**4. Corporate Address in Rhode Island**

No. and Street: 222 JEFFERSON BOULEVARD  
SUITE 200

City or Town: WARWICK State: RI Zip: 02888 Country: USA

**5. Foreign Corporation. Enter Principal Office Address**

No. and Street: 500 OFFICE PARK DRIVE  
SUITE 300  
City or Town: BIRMINGHAM State: AL Zip: 35223 Country: USA

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

TO ASSIST IN THE DEVELOPMENT, CONSTRUCTION OR OPERATION OF PUBLIC  
HOUSING AS AN INSTRUMENTALITY OF THE JEFFERSON COUNTY HOUSING  
AUTHORITY AN ALABAMA PUBLIC CORPORATION

**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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**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	ERIC Q STRONG	1824 MOUNTAIN LAUREL LN HOOVER, AL 35244 USA

SECRETARY	JULIA REYNOLDS	217 EASTWOOD DRIVE HOMEWOOD, AL 35209 USA
DIRECTOR	LISA MCCARROLL	500 OFFICE PARK DRIVE, SUITE 300 BIRMINGHAM, AL 35223 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**

CORPORATION SERVICE COMPANY 222 JEFFERSON BOULEVARD, SUITE 200 WARWICK, RI  
02888

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

**Signed this 8 Day of July, 2016 at 2:10:21 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 JULIA REYNOLDS  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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