



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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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