



**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: 2017

1. Corporate ID No. 000097555

2. Name of Corporation HOUSING PARTNERS FOR POSITIVE LIVING, INC.

3. State of Incorporation

State: RI

ARTICLE III

Using the dropdown labeled NAICS Code below, select the classification title that describes the primary type of activity in which your entity engages. The box to the right of the dropdown will populate a NAICS Code based on the chosen selection. If the NAICS Code is known, enter it into the box on the right. For further assistance with selecting a classification [click here](#).

NAICS Code

4. Corporate Address in Rhode Island

No. and Street: 800 CLINTON STREET, SUITE 302

P.O. BOX 1700

City or Town: WOONSOCKET

State: RI Zip: 02895 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 PROVIDE ELDERLY OR DISABLED PERSONS WITH HOUSING FACILITIES AND SERVICES.

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Incorporator is no longer applicable; please delete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	BENEDICT F LESSING JR	C/O COMMUNITY CARE ALLIANCE, PO BOX 1700 WOONSOCKET, RI 02895 USA
TREASURER	ROLAND M BOUCHER	273 GREAT RD N. SMITHFIELD, RI 02896 USA
SECRETARY	MARIANNE GRONDALSKI	10 BETTY ST LINCOLN, RI 02865 USA
CHAIR	FELICE DESMARAIS	42 DESROCHERS AVE WOONSOCKET, RI 02895 USA
NON- VOTING DIRECTOR	BENEDICT F LESSING JR.	P O BOX 1700 WOONSOCKET, RI 02895 USA
DIRECTOR	ROLAND M. BOUCHER	273 GREAT ROAD NORTH SMITHFIELD, RI 02896
DIRECTOR	MARIANNE GRONDALSKI	10 BETTY STREET LINCOLN, RI 02865 USA
DIRECTOR	FELICE DESMARAIS	42 DESROCHERS AVE WOONSOCKET, RI 02895 USA
DIRECTOR	JOSEPH F. GARLICK JR.	119 BAYARD ST PROVIDENCE, RI 02906 USA
DIRECTOR	PAUL M. DUMOUCHEL	12 ROGLER FARM RD SMITHFIELD, RI 02917 USA
DIRECTOR	CHRISTINE GADBOIS	155 DAVIS ST SEEKONK, MA 02771 USA
DIRECTOR	DEBRA A HAWES	588 NEWPORT AVE UNIT B SO. ATTLEBORO, MA 02703 USA
DIRECTOR	DANIEL J KUBAS- MEYER	40 CENTENNIAL AVE BARRINGTON, RI 02806 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**

CYNTHIA J. WARREN, ESQ. CAMERON & MITTLEMAN LLP 301 PROMENADE STREET
PROVIDENCE , RI 02908

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

Signed this 13 Day of June, 2017 at 4:41:40 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 BENEDICT LESSING
Signature of Authorized Person

Revised 09/07

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