



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Matthew A. Brown, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 117630		2. Name of Corporation TCB Olmsted Commons, Inc.			
3. Street Address Principal Business Office 2 REGENCY PLAZA			City PROVIDENCE	State RI	Zip 02903-
4. Business Phone No. 4013317226		5. State of Incorporation RHODE ISLAND			6. SIC Code 5710
7. Brief Description of the Character of Business Conducted in Rhode Island TO DEVELOP OR ACQUIRE BY PURCHASE OR BY LEASE, EITHER AS A PARTNER WITH OTHERS OR SOLEY, HOUSING FOR LOW AND MODERATE INCOME PERSONS AND FAMILIES TOGETHER WITH RELATED FACILITIES					
8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Phillip L. Clay		Vice President Name James F. Rushford			
Street Address 95 Berkeley Street		Street Address 95 Berkeley Street			
City Boston	State MA	Zip 02116	City Boston	State MA	Zip 02116
Secretary Name		Treasurer Name Stephen H. Anthony			
Street Address		Street Address 95 Berkeley Street			
City	State	Zip	City Boston	State MA	Zip 02116
9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Phillip L. Clay		Director Name Stephen H. Anthony			
Street Address 95 Berkeley Street		Street Address 95 Berkeley Street			
City Boston	State MA	Zip 02116	City Boston	State MA	Zip 02116
Director Name		Director Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
4,000 COMM NO PAR VALUE			100	common	no par

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



1 1 7 6 3 0

117630 DBC 05/19/05 03:07:17 PM

FILED

File Date

Check No. JUN 20 2005

By: B.M. [Signature]

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer: James F. Rushford Date: 6/20/2005

Print or Type Name of Officer: James F. Rushford

Secretary

Title of Officer



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Matthew A. Brown, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 117630		2. Name of Corporation TCB Olmsted Commons, Inc.			
3. Street Address Principal Business Office 2 REGENCY PLAZA			City PROVIDENCE	State RI	Zip 02903-
4. Business Phone No. 4013317226		5. State of Incorporation RHODE ISLAND			6. SIC Code 5710
7. Brief Description of the Character of Business Conducted in Rhode Island TO DEVELOP OR ACQUIRE BY PURCHASE OR BY LEASE, EITHER AS A PARTNER WITH OTHERS OR SOLEY, HOUSING FOR LOW AND MODERATE INCOME PERSONS AND FAMILIES TOGETHER WITH RELATED FACILITIES					
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President Name Phillip L. Clay		Vice President Name James F. Rushford			
Street Address 95 Berkeley Street		Street Address 95 Berkeley Street			
City Boston	State MA	Zip 02116	City Boston	State MA	Zip 02116
Secretary Name		Treasurer Name Stephen H. Anthony			
Street Address		Street Address 95 Berkeley Street			
City	State	Zip	City Boston	State MA	Zip 02116
9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Phillip L. Clay		Director Name Stephen H. Anthony			
Street Address 95 Berkeley Street		Street Address 95 Berkeley Street			
City Boston	State MA	Zip 02116	City Boston	State MA	Zip 02116
Director Name		Director Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
4,000 COMM NO PAR VALUE			100	common	no par

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



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117630 DBC 05/05/05 17 PM
FILED
File Date
JUN 20 2005
Check No.
By: BYM 70451
FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer
James F. Rushford
Date
6/20/2005
Print or Type Name of Officer
James F. Rushford
Secretary
Title of Officer
Form 630 12/01



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Matthew A. Brown, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401 222 3640

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1 Corporate ID No. 117630 2 Name of Corporation TCB Olmsted Commons, Inc.
3 Street Address Principal Business Office c/o The Community Builders Inc. 2 Regency Plaza Providence RI 02903
4 Business Phone No 401 331-7226 5 State of Incorporation Rhode Island 6 SIC Code 5710

7 Brief Description of the Character of Business Conducted in Rhode Island
As the general partner of limited partnership which develops affordable housing.

8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS

President Name Phillip L. Clay Street Address 95 Berkeley Street City State Zip Boston MA 02116	XXXXXXX Name James Rushford, Assistant Secretary Street Address 95 Berkeley Street City State Zip Boston MA 02116
Secretary Name Christopher L. Noble Street Address 95 Berkeley Street City State Zip Boston MA 02116	Treasurer Name Stephen H. Anthony Street Address 95 Berkeley Street City State Zip Boston RI 02116

9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name Phillip L. Clay Street Address 95 Berkeley Street City State Zip Boston MA 02116	Director Name Stephen H. Anthony Street Address 95 Berkeley Street City State Zip Boston MA 02116
Director Name Christopher L. Noble Street Address 95 Berkeley Street City State Zip Boston MA 02116	

10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) ☐

Number of Shares	Class/Series	Par Value
4,000	COMM	NO PAR VALUE

11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐

ISSUED SHARES Number of Shares	Class/Series	Par Value
100	common	no par

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

DEC 09 2003

By James Rushford
C 13622

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct

James Rushford 12/1/03
Signature of Officer Date
James Rushford
Print or Type Name of Officer
Assistant Secretary
Title of Officer

File Date _____

Check No _____

By _____

FOR SECRETARY OF STATE USE ONLY



AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

100 North Main Street, Providence, RI 02903-1335
401-222-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.

2. Name of Corporation

117630

TCB Olmsted Commons, Inc.

3. Street Address Principal Business Office

c/o The Community Builders, Inc.

City

State

Zip

2. Regency Plaza

Providence

RI

02903

4. Business Phone No.

5. State of Incorporation

401-331-7226

RHODE ISLAND

6. SIC Code

5710

7. Brief Description of the Character of Business Conducted in Rhode Island

As the general partner of limited partnership which develops affordable housing

8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name

Phillip L. Clay

~~XXXXXX~~ Name Assistant Secretary

James Rushford

Street Address

95 Berkeley Street

Street Address

95 Berkeley Street

City Boston State MA Zip 02116

City Boston State MA Zip 02116

Secretary Name

Christopher L. Noble

Treasurer Name

Stephen H. Anthony

Street Address

95 Berkeley Street

Street Address

95 Berkeley Street

City Boston State MA Zip 02116

City Boston State MA Zip 02116

9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name

Phillip L. Clay

Director Name

Stephen H. Anthony

Street Address

95 Berkeley Street

Street Address

95 Berkeley Street

City Boston State MA Zip 02116

City Boston State MA Zip 02116

Director Name

Christopher L. Noble

Director Name

Street Address

Street Address

95 Berkeley Street

City Boston State MA Zip 02116

10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

4,000 COMM NO PAR VALUE

11. SHARES ISSUED ("X" BOX FOR ATTACHMENT)

ISSUED SHARES

Number of Shares

Class/Series

Par Value

100

common

no par

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 1 1 7 6 3 0 *

File Date: 2-1-02

Check No.: 1273

By: [Signature]

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

[Signature] January 31, 2002
Signature of Officer Date

James Rushford

Print or Type Name of Officer

Assistant Secretary

Title of Officer

5

Form 630 12/01