



State of Rhode Island and Providence Plantations  
**Department of State - Business Services Division**

**FILED**

JUL 01 2019

*J.P. P.P.*

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STATE OF RHODE ISLAND  
 DEPARTMENT OF STATE

Annual Report for the year: **2019**

Non-Profit Corporation

→ Filing period: June 1 - June 30

→ Filing Fee: \$20.00

→ Penalty: Additional \$25.00 fee if form is not filed by July 30.

1. Entity ID Number <b>58867</b>		2. Exact name of the Corporation <b>PEMBRTON PLACE HOUSING CORPORATION</b>					
3. State of Incorporation <b>RHODE ISLAND</b>		5. Brief description of the character of business conducted in Rhode Island <b>Providing affordable housing for low to moderate income families</b>					
4. NAICS Code <b>624229 - Other Community I</b>							
6. Principal Office Address <b>50 WASHINGTON SQUARE</b>				City <b>NEWPORT</b>		State <b>RI</b>	Zip <b>02840</b>
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>							
President Name <b>ED GROMADA</b>				Vice-President Name <b>ROBERT M. SABEL</b>			
Street Address <b>50 WASHINGTON SQUARE</b>				Street Address <b>50 WASHINGTON SQUARE</b>			
City <b>NEWPORT</b>		State <b>RI</b>	Zip <b>02840</b>		City <b>NEWPORT</b>		Zip <b>02840</b>
Secretary Name <b>VALERIE MOLLOY</b>				Treasurer Name <b>VALERIE MOLLOY</b>			
Street Address <b>70 COLOMBIA AVENUE</b>				Street Address <b>70 COLOMBIA AVENUE</b>			
City <b>JAMESTOWN</b>		State <b>RI</b>	Zip <b>02835</b>		City <b>JAMESTOWN</b>		Zip <b>02835</b>
8. List ALL directors (names and addresses). RI Corporations <b>MUST</b> list at least <b>THREE</b> directors. <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>							
Director Name <b>STEPHEN P. OSTIGUY</b>				Director Name <b>PAUL MURPHY</b>			
Street Address <b>50 WASHINGTON SQUARE</b>				Street Address <b>423 UNION STREET</b>			
City <b>NEWPORT</b>		State <b>RI</b>	Zip <b>02840</b>		City <b>PORTSMOUTH</b>		Zip <b>02871</b>
Director Name <b>CARROLL PRUELL</b>				Director Name <b>ROBERT M. SABEL</b>			
Street Address <b>125 CONANICUS AVENUE</b>				Street Address <b>50 WASHINGTON SQUARE</b>			
City <b>JAMESTOWN</b>		State <b>RI</b>	Zip <b>02835</b>		City <b>NEWPORT</b>		Zip <b>02840</b>
9. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641.							
<b>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.</b>							
<i>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee</i>							
Name of Officer/Authorized Representative <b>STEPHEN P. OSTIGUY</b>						Date <b>6/20/2019</b>	
Signature of Officer/Authorized Representative <i>[Signature]</i>							
SIGN DOCUMENT HERE							

MAIL TO:  
 Division of Business Services  
 148 W. River Street, Providence, Rhode Island 02904-2615  
 Phone: (401) 222-3040  
 Website: www.sos.n.gov