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State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: 2019
Non-Profit Corporation

2019

-> Filling period: June 1 - June 30

→ Filing Fee: \$20.00

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

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|---|--|--------------------------|---|-----------------------------|----------------------|
| 1. Entity ID Number | 2. Exact name of the Corporation | | | | |
| 000153845 | BAYBERRY COURTS, INC. | | | | |
| 3. State of incorporation | 5. Brief description of the character of business conducted in Rhode Island | | | | |
| Rhode Island | To provide elderly or disabled persons with housing facilities and services especially | | | | |
| 4. NAICS Code | designed to n | neet their physic | cal, social and psycholog | ical needs. | |
| 624229 - Other Communit | l . | | | | |
| 6. Principal Office Address | | • | City | State | Zip |
| c/o Gateway Healthcare, Inc. 249 Roosevelt Avenue | | | Pawtucket | RI | 02860 |
| 7. List ALL officers (names and add | | | | Check the box to Ind | icate en attachment |
| President Name Scott DIChristofero | | | Vice-President Name | | |
| Street Address 249 Roosevelt Avenue | | | Street Address | | |
| City Pawtucket | State RI | ^{Zip} 02860 | City | State | Zip |
| Secretary Name Pamela S. LaBreche | | | Treasurer Name Joseph K. Sabetta | | |
| Street Address Navigant Credit Union, 1005 Douglas Pike | | | Street Address 10 Weybosset Street, Suite 700 | | |
| City Smithfield | State RI | ^{Z‡p} 02917 | City Providence | State RI | ^{Zlp} 02903 |
| 8. List ALL directors (names and a | ddresses). RI Corp | porations MUST lis | t at least THREE directors. | Check the box to indi | icate an attachment |
| Director Name Robert A. Mancini (Chair) | | | Director Name Pamela S. LaBreche (Vice Chair) | | |
| Street Address RISCPA, 40 Sharpe Drive, Unit 5 | | | Street Address Navigant Credit Union, 1005 Douglas Pike | | |
| City Cranston | State RI | ^{Zip} 02920 | City Smithfield | State RI | ^{Zip} 02917 |
| Director Name James E. Burdick | | | Director Name Joseph K. Sabetta | | |
| 14.11 | | | Street Address 10 Weybosset Street, Suite 700 | | |
| City Providence | State RI | ^{Zip} 02909 | City Providence | State RI | ^{Zip} 02903 |
| 9. Registered Agent in Rhode Islan | d. This information i | s currently of record | in the Department of State. Chang | es require filing Form (| <u></u> |
| Under penalty of perjury, I declar statements, and that all statemen | | | | companying schee | fules and |
| This report must be signed by either the Pres | ildent, Vice-President, S | Secretary, Assistant Sec | retary, Treasurer, duly Authorized Repi | resentative, Receiver or Yn | istee |
| Name of Officer/Authorized Representative | | | | Date | / - |
| Scott DiChristofero 8/23/19 | | | | | |
| Signature of Officer/Authorized Rep | presentative | | No. 2 Company | | £ |

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov SEP 0 3 2019

FORM 631 - Revised: 06/2019

Bayberry Courts ID# 153842

Directors

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Scott DiChristofero, President – Realty Board Gateway Healthcare, Suite 205 249 Roosevelt Avenue Pawtucket, RI 02860