

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

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005 Filing Period: June 1 - June 30 Filing Fee: \$20.00

(FORM MUST BE TYPED O	R PRINTED IN BL	ACK)				
1. Corporate ID No.	2. Name of Co.			<u> </u>	·	
110538	PROCAP H	OUSING, INC.				
3. State of Incorporation		ddress in Rhode Island -Stre	et Address	City	Zip	
RHODE ISLAND		FORD AVE.		PROVIDENCE	02909-	
5. Foreign corporation: Enter	principal office add	iress	City	State		
					Zip	
6. Brief Description of the cha	racter of the affairs	which are acqually conducts	ed in Phode Island			
TO PROVIDE ELDERLY	PERSONS AND	RANDICADDED DEDC	ONS WITH HOUSING PACILI			
DESIGNED TO MEET T	HEIR PHYSICA	L. SOCIAL AND PSY	ONS WITH HOUSING PACIL! CHOLOGICAL NEPDS	ITIES AND SERVICES S	PECIALLY	
7. NAMES AND ADDRE	SSES OF THE O	FFICEDS CHYT BOY FO	RATTACHMENT) FILL IN SP			
President Name	COLO OF THE O	TTICERS (X BOX FO	Vice President Name	ACES BEFORE USING ATTA	CHMENTS	
Paul A. MacDonald			·N/A			
Street Address			Street Address			
514 Colwell Rd.						
City	State	Zip	City			
Harrisville	RI	02830	·City	State	Zip	
Secretary Name	• • • • • • •		Treasurer Name	!		
Terrence M. Hasse	ett		Terrence M. Has	gett		
Street Address	 -	<u> </u>	Street Address			
15 Higgins Ave.			.15 Higgins Ave.			
City	State	Zip		·		
Providence	RI	02908	City	State	Zip	
			Providence	RI	02908	
THE NUMBER OF	DIRECTORS OF A	IRECTORS ("X" BOX F	OR ATTACHMENT) FILL IN	SPACES BEFORE USING ATT	ACHMENTS	
Director Name	Unicorono or A	DOMESTIC (HHODE IS	LAND) CORPORATION SHALL N	OT BE LESS THAN THREE	(3).R.I.G.L 7-6-23	
· · - · •	-		Director Name		· ··	
ProCAP Housing,	inc.		Frank Corbishle	y		
Street Address			Street Address	· · · · · · · · · · · · · · · · · · ·		
514 Colwell Rd.			36 Edgewood Blv	d.		
City	State	Zip	·City	State	Zip	
Harrisville	RI	02830	Providence	RI	02905	
Director Name	• • • • • • •	• • • • • • • • • • • • • • • • • • • •	Director Name			
Terrence M. Hasse	ett		•			
Street Address			·Street Address			
15 Higgins Ave.			•			
City	State	Zip	.Ciry	State	Zip	
Providence	RI	02908	•			
9. REGISTERED AGENT	IN RHODE ISL	AND -DO NOT ALTER- C	hanges require filing of	Form 641 -RIGI 76137	7.6.79	
igent Name			Address		7-0-76	
Kurt M. Hayes, Esq.			735 Smith St.			
Address			City	14:		
**************************************				Zip		
·			Providence	02908		
his report must be sign	ed in ink by eit.	her the President, Vic	e President, Secretary, Assis			
1 1	0 C C U		Under negative of neg	iury. I declare and affirm that	I have evamined	

110538 DNP 06/01/05 12:19:25 PM

File Date 4 D 05

Check No. 1002 M 68053

By: TMC

FOR SECRETARY OF STATE USE ONLY

Under penalty of regiury, 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) Date
Terrence M. Hassett
Print or Type Name of Officer Secretary/Treasurer

Title of Officer

Form 631 Rev. 6/02



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

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

Filing Period: June 1 - June 30 • Filing Fee: \$20.00 (FORM MUST BE TYPED OR PRINTED IN BLACK) 1. Corporate ID No. 2. Name of Corporation 110538 ProCAP Housing, Inc. 3. State of Incorporation 4. Corporate address in Rhode Island -Street Address Zip Rhode Island Providence 518 Hartford Ave. 02909 5. Foreign corporation: Enter principal office address State Zip 6. Brief Description of the character of the affairs which are actually conducted in Rhode Island Build, construct and otherwise provide housing and for any other lawful purpose 7. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) | FILL IN SPACES BEFORE USING ATTACHMENTS President Name Vice President Name Paul A. MacDonald Street Address Street Address 514 Colwell Rd. City State State Ziρ Cin Zip Harrisville RI 02830 Secretary Name Treasurer Name Terrence M. Hassett Terrence M. Hassett Street Address Street Address 15 Higgins St. .15 Higgins St. City State State Zip City Providence 02908 RI 02908 RI Providence 8. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) I FILL IN SPACES BEFORE USING ATTACHMENTS THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3) R.L.G.L 7-6-23 Director Name Director Name Paul A. MacDonald Terrence M. Hassett Street Address Street Address 514 Colwell Rd. 15 Higgins St. State City State **Zip** ·City Zio 02908 RI Harrisville 02830 Providence RI Director Name Director Name Frank Corbishley Street Address ·Street Address 36 Edgewood Ave. City 7ip -Cir State Zip State - -Providence RI 02905 9. REGISTERED AGENT IN RHODE ISLAND DO NOT ALTER. Changes require filing of Form 641 -R.I.C.L.7-6-13/7-6-78 Agent Name Address Kurt M. Hayes, Esq. Address City Zip 735 Smith St. **Providence** 02908 This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee perjury, I declare and affirm that I have examined Under penalty

File Date 12704

Check No. 120058 C 39144

By: COMM

FOR SECRETARY OF STATE USE ONLY

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

Signature by Officer

Terrence M. Hassett

Print or Type Name of Officer

Secretary/Treasurer

Tute of Officer

Form 631 Rev. 6/02



FOR SECRETARY OF STATE USE ONLY

Edward S. Inman, III, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401.222.3040

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003

President Name	2 Name of Corporal PROCAP HOU 4. Corporate address 735 Smith incipal office address ter of the affairs which and otherwice	USING INC. s in Rhode Island Street Ach h St.	City	Cin Providence	
3. State of Incorporation Rhode Island 5. Foreign corporation: Enter pri 6. Brief Description of the charact Build, construct INAMES AND ADDRESS President Name	4. Corporate address 135 Smith incipal office address ter of the affairs which and otherwit	s in Rhöde Island -Street Ad h St. h are actually conducted in	City	*	
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5. Foreign corporation: Enter pri 6. Brief Description of the charact Build, construct MAMES AND ADDRESS President Name	incipal office address ter of the affairs which and otherwice	n are actually conducted in		priovidence	2ip 02908
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TANAMESTAND/ADDRESS President Name			Khode Island		
TANAMESAND/ADDRESS President Name		se provide hou	sing and for an	y other lawful pur	ipose.
	EN OFFICE OFFI			SPACES BEFORE USING AU	<u> </u>
	,		Vice President Name		
Paul A. MacDonald			Street Address		
Street Address 514 Colwell Rd.			· Sirter Address		
City	State	Zip	City	State	Zip
Harrisville Secretary Name	RI	02830	Tréasurer Name		1
Ecretary Name Frank Corbishley			•	M. Hassett	
Street Address			* Street Address	m. massec	
36 Edgewood Rd.			· 47 Raymoi	nd St.	
City	State	Zip	City	State	Zip
Providence	·RI	02905	: Providence	RI Inspaces beforeusing»	02908
Director Name		MESTIC (RHODE ISLA	ND) CORPORATION SHAL	L NOT BE LESS THAN THRE	E (3).R.L.G.L.7-6-23
Paul A, MacDona Soveer Address 514 Colwell Rd.	ld	MESTIC (RHOUE ISLA	Director Name Terres .Street Address	inor be less than thre nce M. Hassett ymond St.	E (3) R.I.G.E.7-8-23
Street Address 514 Colwell Rd. City	State	Zip	Director Name Terre Street Address 47 Ray City	nce M. Hassett ymond St.	Zip
Street Address 514 Colwell Rd. City Harrisville			Director Name Terre Street Address 47 Rai	nce M. Hassett ymond St.	
Street Address 514 Colwell Rd. City Harrisville Director Name	State R7	Zip	Director Name Terre Street Address 47 Ray City	nce M. Hassett ymond St.	Zip
Street Address 514 Colwell Rd. City Harrisville Director Name Frank Corbishle	State R7	Zip	Director Name Terres Street Address 47 Ras City Providence Director Name	nce M. Hassett ymond St.	Zip
Street Address 514 Colwell Rd. City Harrisville Director Name Frank Corbiskle	State R1	Zip	Director Name Terres Street Address 47 Ras City Providence	nce M. Hassett ymond St.	Zip
Street Address 514 Colwell Rd. City Harrisville Director Name Frank Corbiskles Street Address 36 Edgewood Blvs	State R1 y d State	Zip 02830 	Director Name Terres Street Address 47 Ras City Providence Director Name	nce M. Hassett ymond St.	Zip
Street Address 514 Colwell Rd. City Harrisville Director Name Frank Corbishle Street Address 26 Edgewood Blvd Providence	State RI Y d State RI	Zip 02830	Director Name Terrel Street Address 47 Ray City Providence Director Name Street Address City	nce M. Hassett ymond St. State R. F.	Zip 02908
Street Address 514 Colwell Rd. City Harrisville Director Name Frank Corbiskle Street Address City Providence REGISTERED AGENT E	State RI Y d State RI	Zip 02830	Director Name Terres Street Address 47 Ras City Providence Director Name Street Address City	nce M. Hassett ymond St. State R1	Zip 02908
Street Address 514 Colwell Rd. City Harrisville Director Name Frank Corbiskles Street Address City Providence Providence REGISTERED AGENT E	State R1 y d State R1 RI RHODE ISLAN	Zip 02830	Director Name Terres Street Address 47 Ras City Providence Director Name Street Address City Address	nce M. Hassett ymond St. State Rf. State State Rf. State State State State State Rf. State State Rf. Sta	Zip 02908
Street Address 514 Colwell Rd. City Harrisville Director Name Frank Corbishle Street Address 36 Edgewood Blvd Providence Providence REGISTERED AGENT E gent Name Kurt M. Haye	State R1 y d State R1 RI RHODE ISLAN	Zip 02830	Director Name Terres Street Address 47 Ras City Providence Director Name Street Address City Address	nce M. Hassett ymond St. State R. F.	Zip 02908
Street Address 514 Colwell Rd. City Harrisville Director Name Frank Corbishles Street Address City Providence 9. REGISTERED AGENT E	State R1 y d State R1 RI RHODE ISLAN	Zip 02830	Director Name Terres 1	State State State State State State State Att. Att. Att. Att. Att. Att. Att. Att	Zip 02908

Print or Type Name of Officer

Form 631 Rev. 6/02

Secretary

Title of Officer



Edward S. Inman, III, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401.222.3040

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002 Filing Period: June 1 - June 30 Filing Fee: \$20.00

(FORM MUST BE TYPED OR I	PRINTED IN BLACE				·
I. Corporate ID No. 110538	2. Name of Corporation	PROCAP HOUSI	•		
3. State of Incorporation	· •	in Rhode Island -Street A	ddress	City	Zip
Rhode Island	735 Smith	St.	Lav	Providenc	
5. Foreign corporation: Enter p.	rincipal office address		City	State	Zip
6. Brief Description of the chara	cter of the affairs which o	are actually conducted in	n Rhode Island		
Build, construct	and otherwis	e provide hou	sing and for an	y other lawful pu	rpose.
TENAMES AND ADDRES		NEW TONOV	Vice President Nume	STORES DE LOS CONTRACTOR (CAN	WOUNDER AND A SECOND
Paul A. Mac	Donald		. Vice I resident Nume		
Street Address			Street Address		
514 Colwell	Rd.		•		
City	State	Zip	City	State	Zip
Harrisville Secretary Name	RI	02830	Tréasurer Name		
Frank Corbi	sh Pau		•	oo H. Harrott	
Street Address	oncey	<u> </u>	* Street Address	ce M. Hassett	
36 Edgewood	Rlud		. 47 Paul	nond St.	
City	State	Zip	*City	State	Zip
Providence	RI -	02905	Providence	e RI	02908
8 NAMES AND ADDRES					
I S TO SELECT THE TAXABLE PARTY OF THE TAXABLE PARTY.	RECTORS OF A DOS	TESTIC (RHODE ISLA	ND/CORPORATION SHAL	L'MOT BE LESS THAN THR	140).Q.G.W.22
Director Name	0		Director Name		
Paul A. Maci	vonaca		·	nce M. Hassett	
Street Address			. Street Address		
514 Calwell		· r	- 47 R	zymond St.	12:-
City Harrisville Director Name	State R1	02830	City Providence	RI	Zip 02908
	· h · a · ·		• Director Name •		
Frank Corbi Street Address	опску		· Street Address		
36 Edgewood	Rlud		•		
		Zip	.City	State	Zip
Providence	RI	02905			
9. REGISTERED AGENT	IN RHODE ISLAND	DO NOT ALTER Ch		of Form 841 RLGI-7-6	11/74/8
Agent Name			Address	. 41 . 0 .	
Kurt M. Ha	yes, tsq.		735 Si	nith St.	,
Address			City	Zip	10006
		Providence 02908		77708	
This report must be signe	d in ink hy either i	the President Vice	President Secretary A	ssistant Secretary Treasi	rer. Receiver or Truste
ino report must be signe	a in the by cliner	me i residem, rice .	resident, occident, in		
				perjury, I declare and affirm	
		\neg		ling any accompanying sched ments contained herein are tru	
0.01.	-12		aiki tilat ait statet		/ .
File Date 8-20	02	•	Prank	Calebriley.	8/22/02
File Date 9-26	75		Signature of Office		Date
Check No. ////	<u>/</u>		Frank Corn	hishlou	
	OF :		Print or Type Name	e of Officer	
B <u>y</u>		1.	Secretary		
FOR SECRETARY OF STATE USE ONLY			Title of Officer		Form 631 Rev. 6/1



Edward S. Inman, III, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401.222.3040

I. Corporate ID No. 110538 3. State of Incorporation	2. Name of Corpora	tion				
3. State of Incorporation			OUSING, INC.			
	4. Corporate addres	s in Rhode Island -Street A	ddress	City	Zip	
Rhode Island	735 Smith	St.	_	Providence	02908	
5. Foreign corporation: Enter pr	incipal office address		City	State	Zip	
6. Brief Description of the charac	cter of the affairs which	h are actually conducted in	n Rhode Island	<u>l</u>		
Build, construct	and otherwi	se provide hou	ising and for an	y other lawful pu	rposes.	
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President Name	2 4		Vice President Name			
Paul A. Mac Street Address	evonald		* Street Address			
	בח ל		Street Maaress			
514 Colwell	State	Ζip	*City	State	Zip	
Harrisville	RI	02830	•			
Secretary Name			Treasurer Name			
Frank Corbishle	2 <i>y</i>		: Terrence M	l. Hassett		
Street Address			Street Address			
Street Address			•			
36 Edgewood Blu	od.		 47 Raymond 			
36 Edgewood Blu	State RI	Zip 02905	47 Raymond City Providence	State	^{Zip} 02908	
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Etta Daga	8-24-02	
File Date Check No.	116515	 ·
Ву;	AMF	
FOR SECRE	TARY OF STATE USE ONLY	

this report, including any accompanying sched and that all statements contained herein are true	
French Colin Un	8/22/02
(/ -	Date
Frank Corbishley Print or Type Name of Officer	
Secretary	
Title of Officer	Form 631 Rev. 6/02