



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

FILED

JUN 11 2020 *02*

14015

Annual Report for the year: 2020

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 29526		2. Exact name of the Corporation Peace Dale United Church Housing <i>INC</i>			
3. State of Incorporation Rhode Island		5. Brief description of the character of business conducted in Rhode Island To provide affordable housing to the elderly and handicapped			
4. NAICS Code 624120 - Services for Elders					
6. Principal Office Address 1221 Saugatucket Road		City Wakefield	State RI	Zip 02879	
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Linda F. Redmond		Vice-President Name Judith Healy			
Street Address 33 Woodmans Trail		Street Address 62 Fire Lane 6			
City Wakefield	State RI	Zip 02879	City Wakefield	State RI	Zip 02879
Secretary Name Mary Louise McMillan		Treasurer Name Carol Anne Hayes			
Street Address 20 Cobblestone Hill Road		Street Address 195 North Niantic Drive			
City Exeter	State RI	Zip 02822	City Charlestown	State RI	Zip 02813
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment <input type="checkbox"/>					
Director Name Carol Vetter		Director Name Ann Brakenwagen			
Street Address 188 Briarwood Drive		Street Address 94 Chestnut Avenue			
City Wakefield	State RI	Zip 02879	City Narragansett	State RI	Zip 02882
Director Name James Balnaves		Director Name Shirley Anderson			
Street Address 66 Edgewater Road		Street Address 139 Highland Avenue			
City Wakefield	State RI	Zip 020879	City Wakefield	State RI	Zip 02879
9. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641.					
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.					
<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 Linda F. Redmond				Date 5-27-20	
Signature of Officer/Authorized Representative <i>Linda F. Redmond</i>				SIGN DOCUMENT HERE	

MAIL TO:
 Division of Business Services
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 Phone: (401) 222-3040
 Website: www.sos.ri.gov