



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2008

Filing Period: January 1 - March 1 • Filing Fee: \$50.00* THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK
* In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 10189		2. Name of Corporation Metacomet Realty Company			
3. Street Address Principal Business Office 500 Veterans Memorial Parkway			City East Providence	State RI 02914	Zip 02914
4. Business Phone No. 401-438-1122		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Anthony W. Scorpio			Vice President Name Lewis H. Wintman		
Street Address 222 Richmond Street Suite 402			Street Address 11 Astral Avenue		
City Providence	State RI	Zip 02908	City Providence	State RI	Zip 02906
Secretary Name Robert P. Verri			Treasurer Name Robert P. Verri		
Street Address 999 Chalkstone Avenue			Street Address 999 Chalkstone Avenue		
City Providence	State RI	Zip 02908	City Providence	State RI	Zip 02908
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Ronald Margerison			Director Name Paul J. Bordieri, Sr.		
Street Address 225 Chimney Drive			Street Address 1000 Smith Street		
City Warwick	State RI	Zip 02886	City Providence	State RI	Zip 02908
Director Name Irwin Hamin			Director Name Joseph Beretta		
Street Address 6 Village Drive			Street Address 50 Holden Street		
City East Providence	State RI	Zip 02915	City Providence	State RI	Zip 02908
9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) ☐ AUTHORIZED SHARES			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐ ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1,500 Comm	\$100.00 Par Value		1,258	Common	\$100.00

This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

File Date	FILED
Check No.	FEB 07 2008
By	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] **1-25-08**
Signature Date
Robert P. Verri
Print or Type Name
Secretary/Treasurer
Title