



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. 8485		2. Name of Corporation G & K Realty Company			
3. Street Address Principal Business Office 85 South Street			City Providence	State RI	Zip 02903
4. Business Phone No. 401-421-2704		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) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name John J. Feeney			Vice President Name Elisabeth A. Feeney		
Street Address 85 South Street			Street Address 85 South Street		
City Providence	State RI	Zip 02903	City Providence	State RI	Zip 02903
Secretary Name Elisabeth A. Feeney			Treasurer Name John J. Feeney		
Street Address 85 South Street			Street Address 85 South Street		
City Providence	State RI	Zip 02903	City Providence	State RI	Zip 02903
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name John W. Grosse			Director Name John J. Feeney		
Street Address 85 South Street			Street Address 85 South Street		
City Providence	State RI	Zip 02903	City Providence	State RI	Zip 02903
Director Name Elisabeth A. Feeney			Director Name		
Street Address 85 South Street			Street Address		
City Providence	State RI	Zip 02903	City	State	Zip
9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
AUTHORIZED SHARES					
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
100	Common	No Par	100	Common	No Par
10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
ISSUED SHARES — THIS SECTION MUST BE COMPLETED					
Number of Shares					
Class/Series					
Par Value					

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 26 2008  
By: DS 33209  
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: *John J. Feeney* Date: 2-20-08  
John J. Feeney  
Print or Type Name  
President  
Title