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.	2. Name of Corporation		
4958	COUNTY ROAD REALTY CORPORATION		
3. Street Address Principal Business Office	City	State	Zip
1580 Wampanoag Trail #200E	Barrington	RI	02806
4. Business Phone No.	5. State of Incorporation		
(401) 437-1169	RHODE ISLAND		

6. Brief Description of the Character of Business Conducted in Rhode Island
REAL ESTATE

7. NAMES AND ADDRESSES OF THE OFFICERS: ***("X" BOX FOR ATTACHMENT)*** ☐ **FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name			Vice President Name		
John F. Cuzzone III			Christopher E. Cuzzone		
Street Address			Street Address		
12 Pine Cone Drive			261 Lincoln Avenue		
City	State	Zip	City	State	Zip
Barrington	RI	02806	Barrington	RI	02806
Secretary Name			Treasurer Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip

8. NAMES AND ADDRESSES OF THE DIRECTORS: ***("X" BOX FOR ATTACHMENT)*** ☐ **FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name			Director Name		
John F. Cuzzone III			Christopher E. Cuzzone		
Street Address			Street Address		
12 Pine Cone Drive			261 Lincoln Avenue		
City	State	Zip	City	State	Zip
Barrington	RI	02806	Barrington	RI	02806
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip

9. SHARES AUTHORIZED ***("X" BOX FOR ATTACHMENT)*** ☐

AUTHORIZED SHARES

Number of Shares	Class/Series	Par Value
600 COMM NO PAR VALUE		

10. SHARES ISSUED ***("X" BOX FOR ATTACHMENT)*** ☐

ISSUED SHARES — THIS SECTION MUST BE COMPLETED

Number of Shares	Class/Series	Par Value
600	Common	No Par

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.

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: [signature] Date: 3/26/08

John F. Cuzzone III
Print or Type Name

President
Title

FILED
File Date FEB 28 2008
Check No. 13229
By: By
FOR SECRETARY OF STATE USE ONLY

Form 630 Rev. 12/06