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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 2009

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			
112861	Auto Realty, Inc.			
3. Street Address Principal Business Office		City	State	Zip
764 GREAT ROAD		N. SMITHFIELD	RI	02896
4. Business Phone No.	5. State of Incorporation			
4017691211	RHODE ISLAND			

6. Brief Description of the Character of Business Conducted in Rhode Island
TO BUY, SELL, LEASE, LET, GRANT, IMPROVE, DEVELOP, REPAIR, MANAGE, MAINTAIN AND OPERATE REAL PROPERTY OF EVERY KIND

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

President Name	Donald Ethier		Vice President Name	Donald Ethier	
Street Address	190 Smith Hill Rd		Street Address	190 Smith Hill Rd	
City	Harrisville	State: rI Zip: 02830	City	Harrisville	State: RI Zip: 02830
Secretary Name	Lorraine Sparrow		Treasurer Name	Donald Ethier	
Street Address	795 Victory Highway		Street Address	190 Smith Hill Rd	
City	Mapleville	State: RI Zip: 02839	City	Harrisville	State: RI Zip: 02830

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

Director Name	Donald Ethier		Director Name		
Street Address	190 Smith Hill Rd		Street Address		
City	Harrisville	State: RI Zip: 02830	City		State: Zip:
Director Name			Director Name		
Street Address			Street Address		
City		State: Zip:	City		State: Zip:

9. SHARES AUTHORIZED

This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.

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

ISSUED SHARES — THIS SECTION MUST BE COMPLETED

Number of Shares	Class/Series	Par Value
1000	common	0

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.

[redacted]

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.

[redacted]

Signature *Date* 2-24-09

Donald Ethier
Print or Type Name

President
Title

File Date 2-24-09
Check No. 706
By: MNC
FOR SECRETARY OF STATE USE ONLY

31384-24-351187

Form 630 Rev. 08/08