



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. 63958		2. Name of Corporation DUMAIS REALTY, INC.			
3. Street Address Principal Business Office 905 VICTORY HIGHWAY / P.O. BOX 115			City SLATERSVILLE	State RI	Zip 02876
4. Business Phone No. 401-767-3352		5. State of Incorporation 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 WALLACE A. DUMAIS, JR.			Vice President Name NONE		
Street Address 905 VICTORY HIGHWAY / P.O. BOX 115			Street Address		
City SLATERSVILLE	State RI	Zip 02876	City	State	Zip
Secretary Name WALLACE A. DUMAIS, JR.			Treasurer Name WALLACE A. DUMAIS, JR.		
Street Address 905 VICTORY HIGHWAY / P.O. BOX 115			Street Address 905 VICTORY HIGHWAY / P.O. BOX 115		
City SLATERSVILLE	State RI	Zip 02876	City SLATERSVILLE	State RI	Zip 02876
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name NONE			Director Name NONE		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name NONE			Director Name NONE		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐		
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.			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
			Number of Shares 100	Class/Series COMMON	Par Value NPV

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.

FILED
File Date MAR 05 2009
Check 4840
By 4840
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
WALLACE A. DUMAIS, JR.
Date
Print or Type Name
PRESIDENT
Title