

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.		B 7 8 7			- (
1. Corporate ID No. 12524	2. Name of Corporation Parkway Realty, Inc.				
3. Street Address Principal Business Office Ten New England Way			City Warwick	State RI	^{Zip} 02886
4. Business Phone No. 5. State of Incorporation Rhode Island				•	
6. Brief Description of the Character of Real Estate	of Business Conducted in R	bode Island			
7. NAMES AND ADDRESSES	OF THE OFFICERS:	("X" BOX FOR ATTA		PACES BEFORE USING	ATTACHMENTS
Nicholas Picchione II			Vice President Name Ann O Picchione		
Street Address 244 Kingstown Road			Street Address 546 Angell Street, #4		
<i>City</i> Narragansett	State RI	^{Ζφ} 02882	City Providence	State RI	^{Zip} 02906
Nicholas Picchione II			Treasurer Name Nicholas Picchione ii		
Street Address 244 Kingstown Road			Street Address 244 Kingstown Road		
City Narragansett	State RI	^{Zip} 02882	City Narrgansett	State RI	^{Zip} 02882
8. NAMES AND ADDRESSES	OF THE DIRECTOR	S: ("X" BOX FOR ATT		SPACES BEFORE USIN	G ATTACHMENTS
Micheal A Halperson			Director Name		
Street Address			Street Address		
78 Cannon Forge Drive	State	Zip	City	State	Ζip
Foxborough	MA	02035	. Only	State	Σψ
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) [ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
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.			Number of Shares	Class/Series	Par Value
			100	Common	No Par
This report must be executed	on behalf of the corp	oration by an authorize	d representative. If the co	orporation is in the hand	s of a receiver or trustee,
this report must be executed	on behalf of the corpo	oration by the receiver of	or trustee.		
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		_			that I have examined this report, atements, and that all statements
FIL	ED		contained herein ar	e true and correct.	1 1
File Date			<u> William</u>	at Holora	~ 8/25/09
Check No AUG 2	6 2999		Signature		Date
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