



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

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2009

Filing Period: June 1 - June 30 • Filing Fee: \$20.00 * THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK
* In accordance with R.I.G.L. 7-6-94, each corporation failing or refusing to file its annual report within the time prescribed by law (R.I.G.L. 7-6-91) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 29768		2. Name of Corporation Columbian Realty Corporation of Cranston	
3. State of Incorporation RI		4. Corporate address in Rhode Island - Street Address 1647 Park Ave	
		City CRANSTON	Zip 02920
5. Foreign corporation. Enter principal office address		City	State
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island ✓			
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name DAVID C. GOEWEY		Vice President Name JAMES DEL FIORE	
Street Address 21 APPLETON ST.		Street Address 34 BRANDON RD	
City CRANSTON	State RI	City CRANSTON	State RI
Zip 02910		Zip 02910	
Secretary Name ALAN CARUOIO		Treasurer Name Richard Hallan	
Street Address 30 Jumper DR.		Street Address 18 PINECREST ROAD	
City CRANSTON	State RI	City CRANSTON	State RI
Zip 02920		Zip 02920	
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS			
THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23			
Director Name Edward Hawley		Director Name Joseph G. Gresham	
Street Address 70 Marlborough ST.		Street Address 14 CIRCUIT DR.	
City CRANSTON	State RI	City WARREN	State RI
Zip 02910		Zip 02889	
Director Name John G. Gresham		Director Name Robert Englehardt	
Street Address 27 CARMEN AVE		Street Address 35 MacArthur DR.	
City CRANSTON	State RI	City WARREN	State RI
Zip 02910		Zip 02889	
9. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78			
Agent Name		Address	
Address		City	Zip

This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

FILED

File Date **NOV 24 2009**

Check No. **By 653**

By: _____
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 of Officer

Date

Richard Hallan

Print or Type Name of Officer

TREASURER
Title of Officer