

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 2011

Filling Period: January 1 - March 1 • Filling 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.

66 593	2. Name of Corporation K & LE L. U	M LAWAY REAL	TY CORP		
66593 3. Street Address Principal Business	Office	- ,, ,	City 0	State	Zip
24 COMM	ence ST.	5. State of Incorporation	PAWTUCKET	R I	09867
4. Business Phone No. 401 - 724 -		5. State of incorporation	2 -	···	
Brief Description of the Character	of Business Conducted in	Rhode Island	<u> </u>	· · · · · · · · · · · · · · · · · · ·	<u>,_</u> .
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. NAMES AND ADDRESSES	OF THE OFFICER	S: ("X" BOX FOR ATTA	CHMENT) FILL IN SPACE	ES BEFORE USING AT	ETACHMENTS
President Name			Vice President Name		
KENDALL F. KERLAWAY Street Address 40 NORTH WASHINGTON &R. City SARASOTA FL Zip 34236					
ireet Address 40 NOR 771	WASHINGTE	ou dr.	Street Address		
City	State	Zip	City	State	Zip
SARASOTA] FL	34236	: ·		
SECRETARY NAME SHARON KERCHWHY			Treasurer Name KERDALL P. KELLYWAY		
Street Address			Street Address		
City SARASOM FL 34236			Street Address 40 NONTH WASHINGTON &C City SARASOTA FL 34236		
(h) SAAASA	State	Zip 2 // 3 - /	City	State	Zip
JUNES AND ADDRESSES	FL	34436	: JARASOM	<i>FL</i>	34236
. NAMES AND ADDRESSES irector Name	OF THE DIRECTO	K3: ("X" BOX FOR ATT	**CACHMENT)	ACES BEFORE USING	ATTACHMENTS
KENDALL P. KETLAWAY			SHAROH KELLIGHTY		
SARASOM FL 34236			Street Address 40 NONTH W454146104 DN City SARASOM FL 3423L		
ity Sadassa	State	Zip	City	State	Zip
************************************	J - FC	34236	SARASOM	FL	34236
irector Name			Director Name		************************
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CHADEC APPRODUZES		I	:	1	
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
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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
			200	COMMON	10.00
					107
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his report must be executed	on behalf of the cor	poration by an authorize	d representative. If the corpor	ration is in the hands o	f a receiver or trustee
is report must be executed of	on behalf of the corp	poration by the receiver of	or trustee.		
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	_		Under penalty of perju	v. I declare and affirm that	I have examined this re
- FILE		_	including any according	y schedules and staten	ments, and that all staten
			contained berein a great	and correct.	_
ile DateMAR 10	2011			Krasby	3-9-11
Markey. Mr.	n n)		Signature	Mil	Date
Check No. By		1	Keris	ALL P. KAL	Laway
ov:748	(//		Print or Type Name	, , , , , , , , , , , , , , , , , , ,	. ,, y
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FOR SECRETARY OF STA	TE USE ONLY		Title	UEM!	
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