

A. Ralpb 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 2011

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.	2. Name of Corp	2. Name of Corporation				
119108	Fellowship	Fellowship Realty Corp, Inc.				
3. State of Incorporation	4. Corporate address in Rhode Island - Street Address City			City	Zip	
RI	25 Blacksto	one Valley Place, Sui	ite 300	Lincoln	02865	
5. Foreign corporation. Enter principal office address			City	State	Zip	
6. Brief Description of the cha	racter of the affairs whic	b are actually conducted in R	Phode Island			
Oversees ownership a		•				
7. NAMES AND ADDRI	ESSES OF THE OF	FICERS: ("X" BOX FOR A	TTACHMENT) TILL IN SPACE	ES BEFORE HSING AT	TACHMENTS	
President Name			Vice President Name			
Joseph F. Dziobek						
Street Address			Street Address			
1577 Lonsdale Aven	ue					
City	State	Zip	City	State	Zip	
Lincoln	RI	02865	_			
Secretary Name			Treasurer Name			
Richard V. Jost						
Street Address			Street Address	Street Address		
244 Oldwood Road	•					
City	State	Zip	City	State	Zip	
North Attleboro	MA	02760				
8. NAMES AND ADDRE	ESSES OF THE DIR	ECTORS: ("X" BOX FOR	ATTACHMENT) FILL IN SPAC	CES BEFORE USING AT	TTACHMENTS	
THE NUMBER OF DIR	ECTORS OF A DO.	MESTIC (RHODE ISLA	ND) CORPORATION SHALL N	<u>VOT BE LESS THAN TI</u>	HREE (3). R.I.G.L. 7-6-23	
Director Name			Director Name			
Joseph F. Dziobek			Richard V. Jost			
Street Address		·	Street Address			
1577 Lonsdale Avenue			244 Oldwood Road			
City	State	Zip	City	State	Zip	
Lincoln	RI	02865	North Attleboro	MA	02760	
Director Name			Director Name			
Michael Fitzpatrick			John Andrew English			
Street Address			Street Address			
155 South Main Stre	<u>et</u>		3221 Belspring Lane	е		
City	State	Zip	City	State	Zip	
Providence	RI	02903	l Raleigh	NC	27612	
9. REGISTERED AGENT	I IN RHODE ISLA	ND		-	•	
This information is curre	ntly of record in the	e Office of the Secretary	of State. Changes require filing of	f Form 641 - R.I.G.L. 7-6	5-13/7-6-78	
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inis icport	must be signed by	enner me rresident, Vic	ce President, Secretary, Assistan	t Secretary, Treasurer, I	Receiver or Trustee	

1 19108	Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all
File Date	statements contained herein are true and correct. Signature of Officer Date Dat
By: FOR SECRETARY OF STATE USE ONLY	Print or Type Name of Officer Secretary Title of Officer