



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State - Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2013

Filing Period: January 1 - March 1 • This report must be typed or printed legibly.

Filing Fee: \$50.00 • FAILURE TO FILE THIS REPORT BY MARCH 31 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. 438100		2. Exact name of the Corporation R & B Development Corp.			
3. Principal office address 1 Sims Avenue Box 4		City Providence	State RI	Zip 02909	
4. Business Phone No. 401-413-3157		5. State of Incorporation RI			
6. Brief description of the character of business conducted in Rhode Island Real Estate Construction					
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name Clayton Rockefeller			Vice-President Name Nicholas Bauta		
Street Address 532 Kinsley Avenue Unit 501			Street Address 532 Kinsley Avenue Unit 205		
City Providence	State RI	Zip 02909	City Providence	State RI	Zip 02909
Secretary Name Clayton Rockefeller			Treasurer Name Clayton Rockefeller		
Street Address 532 Kinsley Avenue Unit 501			Street Address 532 Kinsley Avenue Unit 501		
City Providence	State RI	Zip 02909	City Providence	State RI	Zip 02909
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name Clayton Rockefeller			Director Name		
Street Address 532 Kinsley Avenue Unit 501			Street Address 532 Kinsley Avenue Unit 205		
City Providence	State RI	Zip 02909	City Providence	State RI	Zip 02909
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
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
			1000	STK	.01

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.

File Date 2-6-13

Check No 993

By: u

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 Authorized Representative

Date

Clayton A. Rockefeller
Print or Type Name of Authorized Representative

Jan 28 2012