



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 2014

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. 43165		2. Exact name of the Corporation N & J REALTY CORPORATION			
3. Principal office address 1030 DANIELSON PIKE		City SCITUATE	State RI	Zip 02857	
4. Business Phone No. 401-647-3821		5. State of Incorporation RI			
6. Brief description of the character of business conducted in Rhode Island OWN, OPERATE, LEASE & DEVELOP REAL ESTATE					
President Name NICHOLAS DERAIMO JR			Vice-President Name JOHN DERAIMO		
Street Address 40A MT HYGEIA ROAD			Street Address POLE 14, BURGESS ROAD		
City FOSTER	State RI	Zip 02825	City FOSTER	State RI	Zip 02825
Secretary Name NICHOLAS DERAIMO JR			Treasurer Name JOHN DERAIMO		
Street Address 40A MT HYGEIA ROAD			Street Address POLE 14, BURGESS ROAD		
City FOSTER	State RI	Zip 02825	City FOSTER	State RI	Zip 02825
Director Name NICHOLAS DERAIMO JR			Director Name JOHN DERAIMO		
Street Address 40A MY HYGEIA ROAD			Street Address POLE 14, BURGESS ROAD		
City FOSTER	State RI	Zip 02825	City FOSTER	State RI	Zip 02825
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
NUMBER OF SHARES ISSUED (SEE BOX FOR ATTACHMENT)					
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 200	CLASS/SERIES COMMON	PAR VALUE NO PAR	

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.

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 **7/16/14**

NICHOLAS DERAIMO, JR., PRESIDENT

Print or Type Name of Authorized Representative

FILED
JUL 18 2014
By **228754**
A.A.