



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

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

2015

Filing Period: January 1 - March 1 • **Filing 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.

1. Corporate ID No. 12595		2. Name of Corporation ELLIE + ROB REALTY CORP			
3. Street Address Principal Business Office 13 CEDAR HOLLOW RD			City WAREFIELD	State RI	Zip 02880
4. Business Phone No. 401-789-7315		5. State of Incorporation RI 02880			
6. Brief Description of the Character of Business Conducted in Rhode Island					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name ROBERT A BALLINGER			Vice President Name		
Street Address 131 CEDAR HOLLOW RD P O BOX 283		Street Address WAREFIELD		State RI	Zip 02880
City WAREFIELD	State RI	Zip 02880	City WAREFIELD	State RI	Zip 02880
Secretary Name ROBERT A BALLINGER 13 CEDAR HOLLOW			Treasurer Name		
Street Address 131 CEDAR HOLLOW RD		Street Address			
City WAREFIELD	State RI	Zip 02880	City WAREFIELD	State RI	Zip 02880
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name ROBERT A BALLINGER			Director Name		
Street Address 131 CEDAR HOLLOW RD		Street Address P O BOX 283			
City WAREFIELD	State RI	Zip 02880	City	State	Zip
Director Name			Director Name		
Street Address		Street Address			
City	State RI	Zip 02880	City	State	Zip
9. SHARES AUTHORIZED 100000 PRR			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.			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
			Number of Shares 1000	Class/Series COMMON	Par Value

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 _____
Check No. _____
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.

Robert A Ballinger **1-13-15**
Signature Date
ROBERT A BALLINGER
Print or Type Name
PRES
Title

FILED
2015
JAN 16 2015

BY **2588**