



Rhode Island
 Providence Plantations
 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. 39986		2. Name of Corporation Acorn Realty, Inc.			
3. Street Address Principal Business Office 33 Acorn Street, Box 4			City Providence	State RI	Zip 02903
4. Business Phone No. 401-272-1814		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island Buying, selling, renting and leasing of real estate					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Raymond F. Drumm			Vice President Name Michael J. Caparco, Sr.		
Street Address 33 Acorn Street, Box 4			Street Address 33 Acorn Street, Box 4		
City Providence	State RI	Zip 02903	City Providence	State RI	Zip 02903
Secretary Name Raymond F. Drumm			Treasurer Name Raymond F. Drumm		
Street Address 33 Acorn Street, Box 4			Street Address 33 Acorn Street, Box 4		
City Providence	State RI	Zip 02903	City Providence	State RI	Zip 02903
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Michael J. Caparco, Sr.			Director Name Raymond F. Drumm		
Street Address 33 Acorn Street, Box 4			Street Address 33 Acorn Street, Box 4		
City Providence	State RI	Zip 02903	City Providence	State RI	Zip 02903
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			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 2,000 shares common stock of no par value	Class Series	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.

FILED

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.

JAN 26 2015

Signature

Date

Michael J. Caparco, Sr.

Print or Type Name

Vice President

Title

File Date _____

Check No. _____

By: _____

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