



STATE OF RHODE ISLAND  
AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State

James R. Langevin, Secretary of State  
Corporations Division  
100 North Main Street, Providence, RI 02903-13  
401-277-30

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1999  
Filing Period: January 1-March 1 • Filing Fee: \$50.00



(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 42000  
2. Name of Corporation First Choice Realty Inc.  
3. Street Address Principal Business Office 1028 PARK AVENUE  
4. Business Phone No. 401-765-7306  
5. State of Incorporation Rhode Island  
City Woonsocket State RI Zip 02895  
6. SIC Code 5502  
7. Brief Description of the Character of Business Conducted in Rhode Island Real Estate Sales & Rentals

8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT)

President Name Austin M. Parry  
Street Address 426 Blackstone St.  
City Woonsocket State RI Zip 02895  
Secretary Name " Same as above "  
Street Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Vice President Name DANIEL C. NEROUX  
Street Address 426 Blackstone St.  
City Woonsocket State RI Zip 02895  
Treasurer Name " Same as above "  
Street Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT)

Director Name \_\_\_\_\_  
Street Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Director Name \_\_\_\_\_  
Street Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)

Number of Shares	Class/Series	Par Value
<u>8000</u>	<u>Shc. No Par Val</u>	<u>None</u>

11. SHARES ISSUED ("X" BOX FOR ATTACHMENT)

Number of Shares	Class/Series	Par Value
<u>600</u>	<u>Common</u>	<u>None</u>

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

Date: 7-22-99  
Check No.: 5452  
AMF

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.

Daniel C. Neroux 7-20-99  
Signature of Officer Date  
DANIEL C. NEROUX  
Print or Type Name of Officer  
Vice President  
Title of Officer