



State of Rhode Island and Providence Plantations
Office of the Secretary of State

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

Fee: \$50.00

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Business Corporation
Annual Report
Filing Period: January 1 - March 1

Help with this form [?](#)

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.

ANNUAL REPORT YEAR:

1. Corporate ID No.

2. Name of Corporation

3. Street Address Principal Business Office:

No. and Street:

 City or Town: State: Zip: Country:

4. Business Phone No.

5. State of Incorporation

State:

6. Brief Description of the Character of Business Conducted in Rhode Island

REAL ESTATE brokerage

FILED

JAN 15 2016
 BY 16L 11931

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed. If officers and/or directors have been elected, the title incorporator is no longer applicable; please delete.

| Delete | Title | Individual Name <small>First, Middle, Last, Suffix</small> | Address <small>Address, City or Town, State, Zip Code, Country</small> |
|--------------------------|-----------|---|---|
| <input type="checkbox"/> | PRESIDENT | SHELDON E RODMAN | 1265 GILBERT STUART ROAD SAUNDERSTOWN, RI 02874 USA |

Select From Below Title:

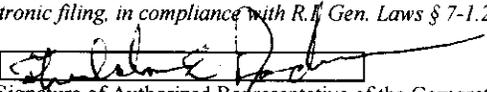
First Name: Middle Name: Last Name: Suffix:

Address: City: State: Zip: Country:

8. Shares Authorized and Issued

| Class of Stock | Series of Stock | Par Value Per Share | Total Authorized Shares <small>Number of Shares</small> | Total Issued and Outstanding <small>Num of Shares</small> |
|----------------|-----------------|---------------------|--|--|
| CNP | | \$0.0000 | 2,000.00 | 50.00 |

9. 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.

| | | | |
|---|--|--------------------------------------|-------------------------------------|
| Filer's Contact Information <i>(Enter a contact name, mailing address and email.)</i> | | | |
| Contact Name: | Sheldon Rodman | | |
| Business Name: | Rodman Real Estate Inc. | | |
| No. and Street: | 245 Waterman St | - Same Address as - ▼ | |
| | Suite 105 | | |
| City or Town: | Providence | State: | R |
| Contact Phone: | | Zip: | 02906 |
| Contact Email: | | Country: | Usa |
| | ext: 11 | | |
| | | <input type="button" value="Clear"/> | |
| Please provide an email address to receive an expedited response from us if the filing is rejected for any reason. If no email address is provided, we will respond by mail. | | | |
| <p>Signed this 12 Day of January, 2016 at 9:59:44 AM. <i>This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.</i></p> | | | |
| By |  Signature of Authorized Representative of the Corporation | | |
| <p>This report cannot be accepted for filing if an officer has executed the form and he/she is not listed in section 7.</p> | | | |
| <p>By selecting ACCEPT you hereby acknowledge that this electronic document is submitted in compliance with R.I. Gen. Laws § 7-1.2. You hereby agree that any legal issues or causes of action arising from the submission of this</p> | | | |
| <p><input checked="" type="radio"/> Accept <input type="radio"/> Decline</p> | | | |
| <input type="button" value="Click HERE to Submit This Information"/> | | | |
| Form No. 630 Revised 09/07 | | | |
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