



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 **2016**

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. 14145		2. Exact name of the Corporation STEBENNE REALTY, LTD.			
3. Principal office address c/o John J. Finan, Jr., Esq., 24 Spring Street			City Pawtucket	State RI	Zip 02860
4. Business Phone No. c/o (401)723-6800			5. State of Incorporation RHODE ISLAND		
6. Brief description of the character of business conducted in Rhode Island THE GENERAL REAL ESTATE BUSINESS					
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name Raymond C. Stebenne			Vice-President Name None		
Street Address 49 Marlane Drive			Street Address		
City Seekonk	State MA	Zip 02771	City	State	Zip
Secretary Name John J. Finan, Jr.			Treasurer Name Raymond C. Stebenne		
Street Address 24 Spring Street			Street Address 49 Marlane Drive		
City Pawtucket	State RI	Zip 02860	City Seekonk	State MA	Zip 02771
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name None			Director Name None		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name None			Director Name None		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED			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.			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
			300 SHS.	COMMON	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.

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.

Raymond C. Stebenne
 Signature of Authorized Representative

1/30/16
 Date

Raymond C. Stebenne, President
 Print or Type Name of Authorized Representative

FILED

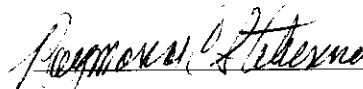
FEB 01 2016

By KL 2497

WAIVER OF NOTICE OF ANNUAL MEETING OF STOCKHOLDERS
STEBENNE REALTY, LTD.

I, the undersigned sole stockholder of STEBENNE REALTY, LTD., a Rhode Island corporation, hereby waive notice of the annual meeting of the stockholders of said company, to be held at the company's offices on the 18th day of November, 2015 at 10:00 a.m., and hereby consent to the transaction of such business as may come before the said meeting or any adjournment thereof.

WITNESS my hand this 18th day of November, 2015.



Raymond C. Stebenne