



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** 2015

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. 000055187		2. Exact name of the Corporation Charles Elliot Properties, Inc.			
3. Principal office address 370 Wampanoag Trail			City East Providence	State RI	Zip 02915
4. Business Phone No. 401-431-1180		5. State of Incorporation Rhode Island			
6. Brief description of the character of business conducted in Rhode Island Real Estate Holding Company					
President Name Charles E. Werchadlo			Vice-President Name Deborah Werchadlo		
Street Address 183 Westcott Road			Street Address 183 Westcott Road		
City North Scituate	State RI	Zip 02857	City North Scituate	State RI	Zip 02857
Secretary Name Deborah Werchadlo			Treasurer Name Charles E. Werchadlo		
Street Address 183 Westcott Road			Street Address 183 Westcott Road		
City North Scituate	State RI	Zip 02857	City North Scituate	State RI	Zip 02857
Director Name Charles E. Werchadlo			Director Name Deborah Werchadlo		
Street Address 183 Westcott Road			Street Address 183 Westcott Road		
City North Scituate	State RI	Zip 02857	City North Scituate	State RI	Zip 02857
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
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 1000	CLASS/SERIES no par value common stock	PAR VALUE 0.00

RECEIVED  
 SECRETARY OF STATE  
 CORPORATIONS DIV  
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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.

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.

**FILED**

*Charles E. Werchadlo*  
 Signature of Authorized Representative Date 4/14/16

APR 12 2016

Charles E. Werchadlo  
 Print or Type Name of Authorized Representative

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