



State of Rhode Island and Providence Plantations

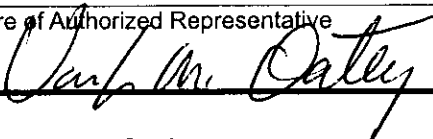
Department of State - Business Services Division

Annual Report for the year: 2017
Corporation

→ Filing period: January 1 - March 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by April 1.

1. Entity ID Number 144475		2. Exact name of the Corporation VKV REALTY, INC.			
3. Principal Office Address 70C North Road		City Shannock		State RI	Zip 02875
4. NAICS Code 53 - Real Estate and Rental and		6. Brief description of the character of business conducted in Rhode Island FOR THE BUYING, SELLING, DEVELOPING AND LEASING OF REAL ESTATE.			
5. State of Incorporation RHODE ISLAND					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name VAUGHN OATLEY		Vice-President Name VAUGHN OATLEY			
Street Address 70C North Road		Street Address same			
City Shannock	State RI	Zip 02875	City	State	Zip
Secretary Name VAUGHN OATLEY		Treasurer Name VAUGHN OATLEY			
Street Address same		Street Address same			
City	State	Zip	City	State	Zip
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name VAUGHN OATLEY		Director Name NONE			
Street Address same		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 This information is currently of record in the Department of State. Changes require an additional filing.		10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>			
		NUMBER OF SHARES		CLASS/SERIES	PAR VALUE
		1000		COMMON	NO PAR
11. 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.					
Name of Authorized Representative VAUGHN M. OATLEY				Date 2-7-17	
Signature of Authorized Representative 				SIGN DOCUMENT HERE FILED 