

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 000142082		2. Exact name of the Corporation VILLA NOVA REALTY INC			
3. Principal Office Address 34 MEADOW RD			City WOONSOCKET	State RI	Zip 02895
4. Business Phone Number 508-839-7348			5. State of Incorporation RI		
6. Brief description of the character of business conducted in Rhode Island REAL ESTATE ACTIVITIES					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name BRIAN BOYSON			Vice-President Name		
Street Address 175 HARVEST LANE			Street Address		
City BRIDGEWATER	State MA	Zip 02324-2456	City	State	Zip
Secretary Name ARCILIA BOYSON			Treasurer Name		
Street Address 175 HARVEST LANE			Street Address		
City BRIDGEWATER	State MA	Zip 02324-2456	City	State	Zip
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized			10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>		
This information is currently of record in the Department of State. Changes require an additional filing.			NUMBER OF SHARES		CLASS/SERIES
			100		COMMON
			PAR VALUE		
				0	
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 <i>Brian Boyson</i>				Date 2/20/2017	
Signature of Authorized Representative BRIAN BOYSON					

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040

Website: www.sos.ri.gov

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FEB 23 2017

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