



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 <b>98093</b>		2. Exact name of the Corporation <b>FFAL, INC.</b>	
3. Principal Office Address <b>191 FOREST AVENUE</b>		City <b>MIDDLETOWN</b>	State <b>RI</b>
		Zip <b>02842</b>	
4. NAICS Code <b>53 - Real Estate and Rental and</b>	6. Brief description of the character of business conducted in Rhode Island <b>TO engage om the real estate business</b>		
5. State of Incorporation <b>RHODE ISLAND</b>			
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>			
President Name <b>STEPHEN P. OSTIGUY</b>		Vice-President Name <b>KARL LYONS, JR.</b>	
Street Address <b>191 FOREST AVENUE</b>		Street Address <b>191 FOREST AVENUE</b>	
City <b>MIDDLETOWN</b>	State <b>RI</b>	Zip <b>02842</b>	City <b>MIDDLETOWN</b>
			State <b>RI</b>
			Zip <b>02842</b>
Secretary Name <b>H.GREER LYON</b>		Treasurer Name <b>STEPHEN P. OSTIGUY</b>	
Street Address <b>191 FOREST AVENUE</b>		Street Address <b>191 FOREST AVENUE</b>	
City <b>MIDDLETOWN</b>	State <b>RI</b>	Zip <b>02842</b>	City <b>MIDDLETOWN</b>
			State <b>RI</b>
			Zip <b>02842</b>
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>			
Director Name <b>KARL LYON, JR.</b>		Director Name <b>STEPHEN P. OSTIGUY</b>	
Street Address <b>191 FOREST AVENUE</b>		Street Address <b>191 FOREST AVENUE</b>	
City <b>MIDDLETOWN</b>	State <b>RI</b>	Zip <b>02842</b>	City <b>MIDDLETOWN</b>
			State <b>RI</b>
			Zip <b>02842</b>
Director Name <b>PAUL MURPHY</b>		Director Name <b>ROBERT M. SABEL</b>	
Street Address <b>50 WASHINGTON SQUARE</b>		Street Address <b>191 FOREST AVENUE</b>	
City <b>NEWPORT</b>	State <b>RI</b>	Zip <b>02840</b>	City <b>MIDDLETOWN</b>
			State <b>RI</b>
			Zip <b>02842</b>
9. Shares Authorized This information is currently of record in the Department of State. Changes require an additional filing.		10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>	
		NUMBER OF SHARES	CLASS/SERIES
		<b>8,000</b>	<b>COMMON</b>
			<b>\$1.00</b>
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 <b>STEPHEN P. OSTIGUY</b>		Date <b>2/18/2017</b>	
Signature of Authorized Representative 		SIGN DOCUMENT HERE	

MAIL TO:  
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Website: www.sos.ri.gov