RI SOS Filing Number: 201738099470 Date: 3/13/2017 4:00:00 PM

State of Rhode Island and Department of Sta			Division				
Annual Report for the ye	ar: 2017						
Corporation → Filing period: January 1 - N → Filing Fee: \$50.00 → Penalty: Additional \$25.00 fe		filed by April 1.	_				
1. Entity ID Number	2. Exact name of the Corporation						
000372235	D & N Real Estate Inc						
3. Principal Office Address 168 Gibson Avenue			City Narragansett	1 *		Zip 02882	
4. NAICS Code 53 - Real Estate and Rental a 5. State of Incorporation Rhode Island	6. Brief description of the character of business conducted in Rhode Island Real Estate Sales						
7. List ALL officers (names and add	resses)				he box to indic	cate an attachment 🔲	
President Name Nicole Harding		Vice-President Name Daniel J Harding					
Street Address 168 Gibson Avenue			Street Address 168	Street Address 168 Gibson Avenue			
City Narragansett	State RI	^{Zip} 02882	City Narragansett		State RI	^{Zip} 02882	
Secretary Name Daniel J Harding	Treasurer Name Nicole Harding						
Street Address 168 Gibson Avenue	Street Address	Street Address 168 Gibson Avenue					
^{City} Narragansett	State RI	^{Zip} 02882	City Narragansett		State RI	^{Zip} 02882	
8. List ALL directors (names and ac	ldresses)	· · · · · · · · · · · · · · · · · · ·		Check t	he box to indic	cate an attachment	
Director Name Nicole Harding			Director Name				
Street Address 168 Glbson Avenue	Street Address	Street Address					
City Narragansett	State RI	Zip 02882	City		State	Zip	
Director Name			Director Name	Director Name			
Street Address			Street Address	Street Address			
City	State	Zip	City		State	Zip	
9. Shares Authorized		10. Shares Iss		Check to	he box to indic	ate an attachment 🔲	
This information is currently of record in the Department of State. Changes require an additional filing.		1000			1.0000		
11. This report must be executed or trustee, this report must be execute Under penalty of perjury, I declar statements, and that all statements	ed on behalf of the re and affirm that ats contained he	e corporation by at I have examin	the receiver or trustee ed this report, include	э	panying sche		
Name of Authorized Representative Nicole Harding			Date 2/23/2017				
Signature of Authorized Representa	FILE	D C)				
Min Ha	:>	ger je ve e v					
MAIL TO: Division of Business Services 148 W. River Street, Providence, Rhode	Island 02904-2615		MAR 13				

Phone: (401) 222-3040 Website: www.sos.ri.gov