



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 53650		2. Exact name of the Corporation Zarrella Development Corp.			
3. Principal Office Address 2 Olsons Way			City East Greenwich	State RI	Zip 02818
4. NAICS Code 23		6. Brief description of the character of business conducted in Rhode Island general contracting business			
5. State of Incorporation RI					
7. List ALL officers (names and addresses) <span style="float:right">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name Debra Zarrella			Vice-President Name Gerald P. Zarrella		
Street Address 270 Narrow Lane			Street Address 270 Narrow Lane		
City Exeter	State RI	Zip 02822	City Exeter	State RI	Zip 02822
Secretary Name Sara Zarrella			Treasurer Name Gerald P. Zarrella		
Street Address 270 Narrow Lane			Street Address 270 Narrow Lane		
City Exeter	State RI	Zip 02822	City Exeter	State RI	Zip 02822
8. List ALL directors (names and addresses) <span style="float:right">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized			10. Shares Issued <span style="float:right">Check the box to indicate an attachment <input type="checkbox"/></span>		
This information is currently of record in the Department of State. Changes require an additional filing.			NUMBER OF SHARES		CLASS/SERIES
			400		common
			PAR VALUE		no
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. <i>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.</i>					
Name of Authorized Representative Gerald P. Zarrella, Vice President					Date 3/13/17
Signature of Authorized Representative 					

**FILED**

MAR 24 2017

BY 1608 DS

MAIL TO:  
 Division of Business Services  
 148 W. River Street, Providence, Rhode Island 02904-2615  
 Phone: (401) 222-3040  
 Website: www.sos.ri.gov