



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State - Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2017

Filing Period: January 1 - March 1 • This report must be typed or printed legibly.

Filing Fee: \$50.00 • FAILURE TO FILE THIS REPORT BY MARCH 31 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. 33721		2. Exact name of the Corporation Twin Oaks Realty Company			
3. Principal office address 100 Sabra Street		City Cranston	State RI	Zip 02910	
4. Business Phone No. 401-274-1300		5. State of Incorporation Rhode Island			
6. Brief description of the character of business conducted in Rhode Island Restaurant					
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) ☐					
President Name William DeAngelus, III			Vice-President Name Susan Valles-DeAngelus		
Street Address 100 Sabra Street			Street Address 135 Albert Avenue		
City Cranston	State RI	Zip 02910	City Cranston	State RI	Zip 02910
Secretary Name William DeAngelus, III			Treasurer Name William DeAngelus, III		
Street Address 100 Sabra Street			Street Address 100 Sabra Street		
City Cranston	State RI	Zip 02910	City Cranston	State RI	Zip 02910
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) ☐					
Director Name William DeAngelus, III			Director Name Susan Valles-DeAngelus		
Street Address 100 Sabra Street			Street Address 135 Albert Avenue		
City Cranston	State RI	Zip 02910	City Cranston	State RI	Zip 02910
Director Name Patricia DeAngelus-Fiske			Director Name Kathleen DeAngelus-Hathaway		
Street Address 100 Sabra Street			Street Address 100 Sabra Street		
City Cranston	State RI	Zip 02910	City Cranston	State RI	Zip 02910
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐		
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
			500	Common	No Par Value

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.

File Date

Check No

By:

FOR SECRETARY OF STATE USE ONLY

FILED

MAR 24 2017

BY 299172
A.A.

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.

Signature of Authorized Representative

William DeAngelus, III, President

Print or Type Name of Authorized Representative

3-15-
Date