



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 18131		2. Exact name of the Corporation Notarantonio Bros., Inc.			
3. Principal Office Address 151 Putnam Pike		City Johnston		State RI	Zip 02919
4. NAICS Code 53	6. Brief description of the character of business conducted in Rhode Island Real estate leasing and operation				
5. State of Incorporation Rhode Island					
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name Joseph A. Notarantonio, III			Vice-President Name Ann M. Maggiacomo		
Street Address 51 Narragansett Avenue			Street Address 183 Old River Road, Unit 3		
City Narragansett	State RI	Zip 02882	City Lincoln	State RI	Zip 02865
Secretary Name Susan M. N. Antonio			Treasurer Name Elaine M. Notarantonio		
Street Address 34 Appleton Street #1			Street Address 34 Arrow Lane		
City Boston	State MA	Zip 02116	City North Kingstown	State RI	Zip 02865
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name Elaine M. Notarantonio			Director Name Susan M. N. Antonio		
Street Address 34 Arrow Lane			Street Address 34 Appleton Street #1		
City North Kingstown	State RI	Zip 02865	City Boston	State MA	Zip 02116
Director Name James M. Maggiacomo			Director Name		
Street Address 33 Whispering Pines Drive			Street Address		
City Cranston	State RI	Zip 02921	City	State	Zip
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      PAR VALUE		
			100      Common      No Par		
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. <b>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.</b>					
Name of Authorized Representative Joseph A. Notarantonio, III				Date 3-27-2017	
Signature of Authorized Representative <i>Joseph A. Notarantonio III</i>					

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

FILED

MAR 31 2017

BY

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FORM 630 - Revised: 02/2017