State of Rhode Island and Pro- Department of State -	ision '			FILED \wedge			
Annual Report for the year: Corporation	18	MAR 2 2 2018					
 → Filing period: January 1 - March 1 → Filing Fee: \$50.00 → Penalty: Additional \$25.00 fee if form is not filed by April 1. 				BY 26410			
	2. Exact name of the Corporation RICHMOND DEVELOPMENT CO. P.NE.						
3. Principal Office Address 88 BRENTON	ZUAD		City	7909	State R. I	Zip 02840	
State of Incorporation R. I. 6. Brief description of the character of business conducted in Rhode Island Lesson of residential real estate, and development of land.							
7. List ALL officers (names and addresses) Check the box to indicate an attachment							
President Name. John W. Richmond, Jr.			Vice-President Name Mary C. Richmund Street Address				
Street Address Brenton Road			1 88 Brenton Road				
City Newhort Sta	R.T	02840		upint	State R. T	Zip UDF40	
Secretary Name Suhn W. Richmond, J.				Mary C- Richmond			
Street Address.			Street Address 88 Brewtun Road				
City Newport Sta	"R I	01F40	City New	port	State	2ip 2840	
8. List ALL directors (names and addresses) Check the box to indicate an attachment							
Director Name	Director Name						
Street Address			Street Address				
City	te	Zip	City .		State	Zip	
Director Name			Director Name				
Street Address			Street Address				
City Sta	ite	Zip	City		State	Zip	
9. Shares Authorized		10. Shares Issue	<u>l</u> d	Check	I the box to in	dicate an attachment	
This information is currently of record in the Department of State.		NUMBER OF SHARES CLASS/SERIE		A			
Changes require an additional filing.		\$000 Class A		r	\$1.50		
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.							
John W. R			Date 3/18/2018				
Signature of Authorized Representative Signature of Authorized Representative Signature of Authorized Representative Signature of Authorized Representative							

RI SOS Filing Number: 201860806670 Date: 3/22/2018 4:00:00 PM

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

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

FORM 630 - Revised: 10/2017