

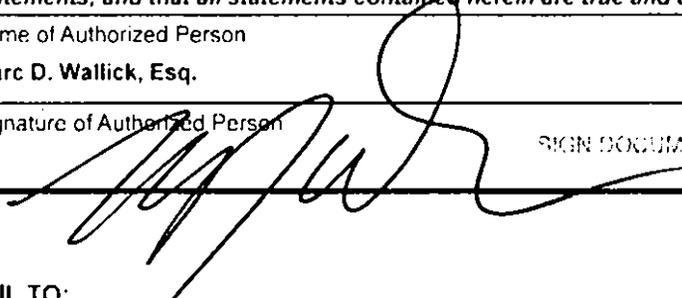


State of Rhode Island and Providence Plantations  
**Department of State - Business Services Division**

STAMP

**Annual Report for the year: 2018**  
**Limited Liability Company**

- Filing period: September 1 - November 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by December 1.

|   |       |   |                                 |                                |                     |
|---|-------|---|---------------------------------|--------------------------------|---------------------|
| 1. Entity ID Number<br><b>113380</b>  |       | 2. Exact name of the Limited Liability Company<br><b>W &amp; P Realty, LLC</b>                    |                                 |                                |                     |
| 3. NAICS Code<br><b>531311</b>  |       | 4. Brief description of the character of business conducted in Rhode Island<br><b>Real Estate</b> |                                 |                                |                     |
| 5. State of Formation<br><b>RI</b>  |       |   |                                 |                                |                     |
| 6. Principal Office Address<br><b>51 Jefferson Boulevard, First Floor</b>   |       |   | City<br><b>Warwick</b>          | State<br><b>RI</b>             | Zip<br><b>02888</b> |
| 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person   |       |   |                                 |                                |                     |
| Contact Name<br><b>Marc D. Wallick, Esq.</b>  |       |   | Contact Title<br><b>Manager</b> |                                |                     |
| Street Address<br><b>51 Jefferson Boulevard</b>   |       |   | City<br><b>Warwick,</b>         | State<br><b>RI</b>             | Zip<br><b>02888</b> |
| 8. List ALL managers (names and addresses) of the Limited Liability Company. IF APPLICABLE - DO NOT LIST MEMBERS  |       |   |                                 |                                |                     |
| Manager Name  |       |   | Manager Name                    |                                |                     |
| Street Address  |       |   | Street Address                  |                                |                     |
| City  | State | Zip   | City                            | State                          | Zip                 |
| Manager Name  |       |   | Manager Name                    |                                |                     |
| Street Address  |       |   | Street Address                  |                                |                     |
| City  | State | Zip   | City                            | State                          | Zip                 |
| Check the box to indicate an attachment <input type="checkbox"/>  |       |   |                                 |                                |                     |
| 9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. Changes require filing Form 642.   |       |   |                                 |                                |                     |
| <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 Person<br><b>Marc D. Wallick, Esq.</b>   |       |   |                                 | Date<br><b>August 15, 2018</b> |                     |
| Signature of Authorized Person<br>   |       |   |                                 | SIGN DOCUMENT HERE             |                     |

**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**

**AUG 27 2018**

BY 5517  
