

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

Annual Report for the year: 2018
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 000059773		2. Exact name of the Corporation ROSS HILL REALTY INC			
3. Principal Office Address 30 DEVILS FOOT ROAD		City NORTH KINGSTOWN		State R.I.	Zip 02852
4. NAICS Code 53110		6. Brief description of the character of business conducted in Rhode Island OWN, MANAGE, SALE OF REAL ESTATE			
5. State of Incorporation R.I.					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name DONALD A. BANNISTER			Vice-President Name DONALD A. BANNISTER		
Street Address 35 PARDON WOODS LANE			Street Address 35 PARDON WOODS LANE		
City EAST GREENWICH	State R.I.	Zip 02818	City EAST GREENWICH	State R.I.	Zip 02818
Secretary Name LELLA BANNISTER			Treasurer Name DONALD A. BANNISTER		
Street Address 35 PARDON WOODS LANE			Street Address 35 PARDON WOODS LANE		
City EAST GREENWICH	State R.I.	Zip 02818	City EAST GREENWICH	State R.I.	Zip 02818
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
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 Check the box to indicate an attachment <input type="checkbox"/>		
This information is currently of record in the Department of State. Changes require an additional filing. 2000 COM NO PAR VALUE			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
			NONE	NONE	NONE
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.					
Name of Authorized Representative DONALD A. BANNISTER				Date 9-6-18	
Signature of Authorized Representative <i>Donald A. Bannister</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

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 SEP 10 2018
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