



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

**Annual Report for the year: 2019**  
**Corporation**

- Filing period: January 1 - March 1  
→ Filing Fee: \$50.00  
→ Penalty: Additional \$25.00 fee if form is not filed by April 1

**FILED**

JAN 07 2019

BY 20767

1. Entity ID Number <b>000002128</b>		2. Exact name of the Corporation <b>Beachcomber Real Estate Agency Inc.</b>			
3. Principal Office Address <b>10 Winnapaug Road</b>		City <b>Westerly</b>		State <b>RI</b>	Zip <b>02891</b>
4. NAICS Code <b>531111</b>		6. Brief description of the character of business conducted in Rhode Island <b>Real Estate Management and sales</b>			
5. State of Incorporation <b>RI</b>					
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name <b>Michelle M. Vacca</b>			Vice-President Name		
Street Address <b>10 Winnapaug Rd</b>			Street Address		
City <b>Westerly</b>	State <b>RI</b>	Zip <b>02891</b>	City	State	Zip
Secretary Name <b>Deborah F. Keindl</b>			Treasurer Name <b>Michelle M. Vacca</b>		
Street Address <b>93 Springdale Road</b>			Street Address <b>10 Winnapaug Road</b>		
City <b>Wethersfield</b>	State <b>CT</b>	Zip <b>06109</b>	City <b>Westerly</b>	State <b>RI</b>	Zip <b>02891</b>
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
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 <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
This information is currently of record in the Department of State.  Changes require an additional filing.			10. Shares Issued		
			NUMBER OF SHARES <b>100</b>	CLASS/SERIES <b>CNP</b>	PAR VALUE <b>0.00</b>
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 <b>Michelle M. Vacca</b>				Date <b>01/07/2019</b>	
Signature of Authorized Representative 					