



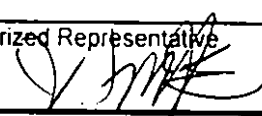
State of Rhode Island and Providence Plantations
Department of State - Business Services Division

Annual Report for the year: 2019
Corporation

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 SECRETARY OF STATE
 CORPORATIONS DIV

2019 JAN 10 PM 2:41

- 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 13162		2. Exact name of the Corporation Munroe Realty, Inc.			
3. Principal Office Address 134 Howard Street			City Coventry	State R.I.	Zip 02816
4. NAICS Code 531390		6. Brief description of the character of business conducted in Rhode Island Engaged in the business of purchasing, holding and disposing of real estate			
5. State of Incorporation Rhode Island					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name David J Munroe			Vice-President Name David J Munroe		
Street Address 458 Phillips Hill Road			Street Address 458 Phillips Hill Road		
City Coventry	State R.I.	Zip 02816	City Coventry	State R.I.	Zip 02816
Secretary Name David J Munroe			Treasurer Name David J Munroe		
Street Address 458 Phillips Hill Road			Street Address 458 Phillips Hill Road		
City Coventry	State R.I.	Zip 02816	City Coventry	State R.I.	Zip 02816
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name David J Munroe			Director Name		
Street Address 458 Phillips Hill Road			Street Address		
City Coventry	State R.I.	Zip 02816	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.			NUMBER OF SHARES		CLASS/SERIES
			100		Common
					PAR VALUE
					No Par Value
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. <i>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.</i>					
Name of Authorized Representative David J Munroe President					Date 1/10/19
Signature of Authorized Representative 					FILED <small>SIGN DOCUMENT HERE</small> JAN 10 2019 2:41

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

BY Dr Smm53