



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**

**FEB 21 2019**

BY

129  
 FOR  
 DEPT. OF ST. TO  
 JUDGE

1. Entity ID Number <b>112098</b>		2. Exact name of the Corporation <b>Ventures on Charles, Inc.</b>												
3. Principal Office Address <b>1414 Atwood Avenue</b>			City <b>Johnston</b>	State <b>RI</b>	Zip <b>02919</b>									
4. NAICS Code <b>531390</b>	6. Brief description of the character of business conducted in Rhode Island <b>Ownership and Development of Real Estate</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>Kelly M. Coates</b>			Vice-President Name <b>Sheryl Carplonato</b>											
Street Address <b>1414 Atwood Avenue</b>			Street Address <b>1414 Atwood Avenue</b>											
City <b>Johnston</b>	State <b>RI</b>	Zip <b>02919</b>	City <b>Johnston</b>	State <b>RI</b>	Zip <b>02919</b>									
Secretary Name <b>Angelo Marocco, Esq.</b>			Treasurer Name <b>Gary Famiglietti</b>											
Street Address <b>1200 Reservoir Avenue</b>			Street Address <b>1414 Atwood Avenue</b>											
City <b>Cranston</b>	State <b>RI</b>	Zip <b>02920</b>	City <b>Johnston</b>	State <b>RI</b>	Zip <b>02919</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			10. Shares Issued <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.			<table border="1"> <thead> <tr> <th>NUMBER OF SHARES</th> <th>CLASS/SERIES</th> <th>PAR VALUE</th> </tr> </thead> <tbody> <tr> <td><b>100</b></td> <td><b>Common</b></td> <td><b>No Par Value</b></td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table>			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	<b>100</b>	<b>Common</b>	<b>No Par Value</b>			
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<b>100</b>	<b>Common</b>	<b>No Par Value</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. <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 <b>Kelly M. Coates</b>				Date <b>1/30/19</b>										
Signature of Authorized Representative  SIGN DOCUMENT HERE														