



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

Annual Report for the year: **2020**
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

STAMP

DEC 23 2019

BY 3829 DS

1. Entity ID Number 139338		2. Exact name of the Corporation Bethel Realty & Development, Inc.			
3. Principal Office Address 3 Poisson Street			City Cumberland	State RI	Zip 02864
4. NAICS Code 531390		6. Brief description of the character of business conducted in Rhode Island The sale, management and development of real estate.			
5. State of Incorporation RI					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Richard W. Harrington			Vice-President Name Richard W. Harrington		
Street Address 3 Poisson Street			Street Address 3 Poisson Street		
City Cumberland	State RI	Zip 02864	City Cumberland	State RI	Zip 02864
Secretary Name Richard W. Harrington			Treasurer Name Richard W. Harrington		
Street Address 3 Poisson Street			Street Address 3 Poisson Street		
City Cumberland	State RI	Zip 02864	City Cumberland	State RI	Zip 02864
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name Richard W. Harrington			Director Name		
Street Address 3 Poisson Street			Street Address		
City Cumberland	State RI	Zip 02864	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		
			PAR VALUE		
			01		
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 Richard W. Harrington				Date 12-17-2019	
Signature of Authorized Representative 				SIGN DOCUMENT HERE	

MAIL TO:
Division of Business Services
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Website: www.sos.ri.gov