



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

FILED

DEC 31 2019

BY 202316 OS

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.

1. Entity ID Number <b>000122956</b>		2. Exact name of the Corporation <b>Louro Property Management, LTD.</b>												
3. Principal Office Address <b>434 Child Street</b>			City <b>Warren</b>	State <b>RI</b>	Zip <b>02885</b>									
4. NAICS Code <b>531110 - Lessors of residential</b>	6. Brief description of the character of business conducted in Rhode Island  <b>To engage in the business of owning and managing rental property</b>													
5. State of Incorporation <b>Rhode Island</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>Ronald J. Louro</b>			Vice-President Name <b>Ronald A. Louro</b>											
Street Address <b>434 Child Street, P.O. Box 56</b>			Street Address <b>10 Deer Run Road</b>											
City <b>Warren</b>	State <b>RI</b>	Zip <b>02885</b>	City <b>Bristol</b>	State <b>RI</b>	Zip <b>02809</b>									
Secretary Name <b>Ronald J. Louro</b>			Treasurer Name <b>Ronald J. Louro</b>											
Street Address <b>434 Child Street, P.O. Box 56</b>			Street Address <b>434 Child Street, P.O. Box 56</b>											
City <b>Warren</b>	State <b>RI</b>	Zip <b>02885</b>	City <b>Warren</b>	State <b>RI</b>	Zip <b>02885</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 <b>Ronald J. Louro</b>			Director Name <b>NONE</b>											
Street Address <b>434 Child Street, P.O. Box 56</b>			Street Address											
City <b>Warren</b>	State <b>RI</b>	Zip <b>02885</b>	City	State	Zip									
Director Name <b>NONE</b>			Director Name <b>NONE</b>											
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>500</b></td> <td><b>Common</b></td> <td><b>No Par</b></td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table>			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	<b>500</b>	<b>Common</b>	<b>No Par</b>			
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<b>500</b>	<b>Common</b>	<b>No Par</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>Ronald J. Louro</b>				Date <b>12/23/19</b>										
Signature of Authorized Representative 				SIGN DOCUMENT HERE										

MAIL TO:  
Division of Business Services  
148 W. River Street, Providence, Rhode Island 02904-2815  
Phone: (401) 222-3040  
Website: www.sos.ri.gov

FORM 630 - Revised: 10/2017