



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**

APR 03 2020 **STAMP**  
BY 30974 FOR SECRETARY OF STATE USE ONLY

1. Entity ID Number <b>69879</b>		2. Exact name of the Corporation <b>W&amp;J REALTY, INC.</b>			
3. Principal Office Address <b>13828 Creston Place</b>		City <b>Wellington</b>		State <b>FL</b>	Zip <b>33414</b>
4. NAICS Code <b>531390</b>	6. Brief description of the character of business conducted in Rhode Island <b>The buying, selling, leasing, holding and managing of all kinds of real estate.</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>Gerald H. Satern</b>			Vice-President Name <b>Gerald H. Satern</b>		
Street Address <b>13828 Creston Place</b>			Street Address <b>13828 Creston Place</b>		
City <b>Wellington</b>	State <b>FL</b>	Zip <b>33414</b>	City <b>Wellington</b>	State <b>FL</b>	Zip <b>33414</b>
Secretary Name <b>Gerald H. Satern</b>			Treasurer Name <b>Gerald H. Satern</b>		
Street Address <b>13828 Creston Place</b>			Street Address <b>13828 Creston Palce</b>		
City <b>Wellington</b>	State <b>FL</b>	Zip <b>33414</b>	City <b>Wellington</b>	State <b>FL</b>	Zip <b>33414</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>Gerald H. Satern</b>			Director Name		
Street Address <b>13828 Creston Place</b>			Street Address		
City <b>Wellington</b>	State <b>FL</b>	Zip <b>33414</b>	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized					
This information is currently of record in the Department of State.					
Changes require an additional filing.					
10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
NUMBER OF SHARES		CLASS/SERIES		PAR VALUE	
<b>200</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.					
<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>Gerald H. Satern, President</b>					Date <b>3-4-20</b>
Signature of Authorized Representative 					SIGN DOCUMENT HERE

MAIL TO:  
Division of Business Services  
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Phone: (401) 222-3040  
Website: www.sos.ri.gov