



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

Filing Period: January 1 - March 1 • Filing Fee: \$50.00
(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 74273		2. Name of Corporation BARBARI REALTY, INC.			
3. Street Address Principal Business Office 457 Tiogue Avenue			City Coventry	State RI	Zip 02816
4. Business Phone No. 821-4840		5. State of Incorporation RHODE ISLAND			6. SIC Code 5538
7. Brief Description of the Character of Business Conducted in Rhode Island BUYING AND SELLING, RENTING AND LEASING OF REAL ESTATE.					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Lois M. Benjamin			Vice President Name Kelly J. Ritarossi		
Street Address 20 Walker Drive			Street Address 39 Monroe Drive		
City Coventry	State RI	Zip 02816	City Coventry	State RI	Zip 02816
Secretary Name Lois M. Benjamin			Treasurer Name Kelly J. Ritarossi		
Street Address 20 Walker Drive			Street Address 39 Monroe Drive		
City Coventry	State RI	Zip 02816	City Coventry	State RI	Zip 02816
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Lois M. Benjamin			Director Name Kelly J. Ritarossi		
Street Address 20 Walker Drive			Street Address 39 Monroe Drive		
City Coventry	State RI	Zip 02816	City Coventry	State RI	Zip 02816
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
600 COMM NO PAR VALUE			900	Common	No Par Value

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



FILED
APR 21 2005 2026
By: [Signature]
FOR SECRETARY OF STATE USE ONLY

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.

[Signature] 3/1/05
Signature of Officer Date

Lois M. Benjamin

Print or Type Name of Officer

President

Title of Officer



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Matthew A. Brown, Secretary of State

Corporations Division
100 North Main Street
Providence, RI 02903-1335
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

Filing Period: January 1 - March 1 • Filing Fee: \$50.00
(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 74273		2. Name of Corporation BARBARI REALTY, INC.		
3. Street Address Principal Business Office 457 Tioque		City Coventry	State RI	Zip 02816
4. Business Phone No. 821-4840		5. State of Incorporation RHODE ISLAND		6. SIC Code 5538
7. Brief Description of the Character of Business Conducted in Rhode Island BUYING AND SELLING, RENTING AND LEASING OF REAL ESTATE.				
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
President Name Lois M. Benjamin		Vice President Name Kelly J. Ritarossi		
Street Address 20 Walker Drive		Street Address 39 Monroe Drive		
City Coventry	State RI	Zip 02816	City Coventry	State RI
Secretary Name Ivy M. Darigan		Treasurer Name Kelly J. Ritarossi		
Street Address 11 Black Walnut Drive		Street Address 39 Monroe Drive		
City Coventry	State RI	Zip 02816	City Coventry	State RI
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
Director Name Lois M. Benjamin		Director Name Kelly J. Ritarossi		
Street Address 20 Walker Drive		Street Address 39 Monroe Drive		
City Coventry	State RI	Zip 02816	City Coventry	State RI
Director Name Ivy M. Darigan		Director Name		
Street Address 11 Black Walnut Drive		Street Address		
City Coventry	State RI	Zip 02816	City	State
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>				
AUTHORIZED SHARES			ISSUED SHARES	
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series
200 COMM NO PAR VALUE			900	Common
				No Par Value
11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>				

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 7 4 2 7 3 *

File Date: 2/26/04
Check No.: 1948
by: W.
FOR SECRETARY OF STATE USE ONLY

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.

Signature of Officer: Lois M. Benjamin Date: 2/14/04
Print or Type Name of Officer: Lois M. Benjamin
Title of Officer: President

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003

Filing Period: January 1-March 1 • Filing Fee: \$50.00



(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. **74273** 2. Name of Corporation **BARBARI REALTY, INC.**
3. Street Address Principal Business Office **457 Tiogue Avenue** City **Coventry** State **RI** Zip **02816**
4. Business Phone No. **821-4840** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **5538**
7. Brief Description of the Character of Business Conducted in Rhode Island

to engage in the business of buying and selling real estate to otherwise manage
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) **FILL IN SPACES BEFORE USING ATTACHMENTS** real estate

President Name Lois M. Benjamin Street Address 20 Walker Drive City Coventry State RI Zip 02816 Secretary Name Ivy M. Darigan Street Address 11 Black Walnut Drive City Coventry State RI Zip 02816	Vice President Name Kelly J. Ritarossi Street Address 39 Monroe Drive City Coventry State RI Zip 02816 Treasurer Name Lois M. Benjamin Street Address 20 Walker Drive City Coventry State RI Zip 02816
--	---

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS	Director Name Lois M. Benjamin Street Address 20 Walker Drive City Coventry State RI Zip 02816 Director Name Ivy M. Darigan Street Address 11 Black Walnut Drive City Coventry State RI Zip 02816	Director Name Kelly J. Ritarossi Street Address 39 Monroe Drive City Coventry State RI Zip 02816
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10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES	Number of Shares	Class/Series	Par Value
	600	COMM	NO PAR VALUE

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES	Number of Shares	Class/Series	Par Value
	none	issued	

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 7 4 2 7 3 *

File Date: ICP 4.9.03
2010
Check No.: ICP
By: ICP

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.

Lois M. Benjamin 2/17/13
Signature of Officer Date
Lois M. Benjamin
Print or Type Name of Officer
President



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **74273** 2. Name of Corporation **BARBARI REALTY, INC.**
3. Street Address Principal Business Office **457 Tiogue Avenue** City **Coventry** State **RI** Zip **02816**
4. Business Phone No. **821-4840** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **5538**

7. Brief Description of the Character of Business Conducted in Rhode Island
to engage in the business of buying and selling real estate to otherwise manage
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) **FILL IN SPACES BEFORE USING ATTACHMENTS** real estate

President Name Lois M. Benjamin Street Address 20 Walker Drive City Coventry State RI Zip 02816	Vice President Name Kelly J. Ritarossi Street Address 39 Monroe Drive City Coventry State RI Zip 02816
Secretary Name Ivy M. Darigan Street Address 11 Black Walnut Drive City Coventry State RI Zip 02816	Treasurer Name Lois M. Benjamin Street Address 20 Walker Drive City Coventry State RI Zip 02816

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS	
Director Name Lois M. Benjamin Street Address 20 Walker Drive City Coventry State RI Zip 02816	Director Name Kelly J. Ritarossi Street Address 39 Monroe Drive City Coventry State RI Zip 02816
Director Name Ivy M. Darigan Street Address 11 Black Walnut Drive City Coventry State RI Zip 02816	

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT) AUTHORIZED SHARES Number of Shares 600 COMM NO PAR VALUE Class/Series Par Value	11. SHARES ISSUED (*X* BOX FOR ATTACHMENT) ISSUED SHARES Number of Shares Not issued Class/Series Par Value
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This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 7 4 2 7 3 *

File Date: 3/13/02
Check No.: 1775
By: LS

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.

Lois M. Benjamin 2/20/02
Signature of Officer Date
Lois M. Benjamin
Print or Type Name of Officer
President
Title of Officer



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **74273** 2. Name of Corporation **BARBARI REALTY, INC.**
3. Street Address Principal Business Office **457 Tiogue Avenue** City **Coventry** State **RI** Zip **02816**
4. Business Phone No. **821-4840** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **5538**

7. Brief Description of the Character of Business Conducted in Rhode Island
to engage in the business of buying and selling real estate to otherwise manage real estate

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) **FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name Lois M. Benjamin Street Address 20 Walker Drive City Coventry State RI Zip 02816	Vice President Name Kelly J. Ritarossi Street Address 39 Monroe Drive City Coventry State RI Zip 02816
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Secretary Name Ivy M. Darigan Street Address 20 Walker Drive City Coventry State RI Zip 02816	Treasurer Name Lois M. Benjamin Street Address 20 Walker Drive City Coventry State RI Zip 02816
--	--

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) **FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name Lois M. Benjamin Street Address 11 Black Walnut Drive City Coventry State RI Zip 02816	Director Name Kelly J. Ritarossi Street Address 39 Monroe Drive City Coventry State RI Zip 02816
Director Name Ivy M. Darigan Street Address 11 Black Walnut Drive City Coventry State RI Zip 02816	

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES
Number of Shares Class/Series Par Value
600 SHS COMM NO PAR VALUE

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES
Number of Shares Class/Series Par Value
Not Issued

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 7 4 2 7 3 *

3/2

File Date: _____

Check No.: **1641**

By: **[Signature]**

FOR SECRETARY OF STATE USE ONLY

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.

[Signature] Date **2/15/01**

Lois M. Benjamin

President



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **74273** 2. Name of Corporation **BARBARI REALTY, INC.**
3. Street Address Principal Business Office **457 Tiogue Avenue** City **Coventry** State **RI** Zip **02816**
4. Business Phone No. **821-4840** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **5538**

7. Brief Description of the Character of Business Conducted in Rhode Island **to engage in the business of buying and selling real estate to otherwise manage real estate**

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name Lois M. Benjamin Street Address 20 Walker Drive City Coventry State RI Zip 02816	Vice President Name Kelly J. Ritarossi Street Address 44 Lake Drive City West Greenwich State RI Zip 02817
Secretary Name Ivy M. Darigan Street Address 11 Black Walnut Drive City Coventry State RI Zip 02816	Treasurer Name Lois M. Benjamin Street Address 20 Walker Drive City Coventry State RI Zip 02816

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name Lois M. Benjamin Street Address 20 Walker Drive City Coventry State RI Zip 02816	Director Name Kelly J. Ritarossi Street Address 44 Lake Drive City West Greenwich State RI Zip 02817
Director Name Ivy M. Darigan Street Address 11 Black Walnut Drive City Coventry State RI Zip 02816	

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES
Number of Shares Class/Series Par Value
600 SHS COMM NO PAR VALUE

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES
Number of Shares Class/Series Par Value
Not Issued

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 7 4 2 7 3 *

File Date: 3/16/00
Check No.: 116800543
By: Lu

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.

Lois M Benjamin 3/1/00
Signature of Officer Date
LOIS M. BENJAMIN
Print or Type Name of Officer
President
Title of Officer



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1999

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)



1. Corporate ID No. **74273** 2. Name of Corporation **BARBARI REALTY, INC.**
3. Street Address Principal Business Office **457 Tiogue Avenue** City **Coventry** State **RI** Zip **02816**
4. Business Phone No. **821-4840** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **5538**

7. Brief Description of the Character of Business Conducted in Rhode Island
to engage in the business of buying and selling real estate to otherwise manage real estate

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) **FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name Lois M. Benjamin Street Address 20 Walker Drive City Coventry State RI Zip 02816 Secretary Name Ivy M. Darigan Street Address 11 Black Walnut Drive City Coventry State RI Zip 02816	Vice President Name Kelly J. Ritarossi Street Address 73 Read Avenue City Coventry State RI Zip 02816 Treasurer Name Lois M. Benjamin Street Address 20 Walker Drive City Coventry State RI Zip 02816
--	--

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) **FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name Lois M. Benjamin Street Address 20 Walker Drive City Coventry State RI Zip 02816	Director Name Kelly J. Ritarossi Street Address 73 Read Avenue City Coventry State RI Zip 02816
Director Name Ivy M. Darigan Street Address 11 Black Walnut Drive City Coventry State RI Zip 02816	

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES
Number of Shares Class/Series Par Value
600 SHS COMM NO PAR VALUE

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES
Number of Shares Class/Series Par Value
not issued

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



File Date: 12/11/99

Check No.: 8062

By: [Signature]

FOR SECRETARY OF STATE USE ONLY

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.

[Signature] 2/10/99
Signature of Officer Date

Lois M. Benjamin

Print or Type Name of Officer

President

Title of Officer



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1998

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)



1. Corporate ID No. **74273** 2. Name of Corporation **BARBARI REALTY, INC.**
3. Street Address Principal Business Office **457 Tiogue Avenue** City **Coventry** State **RI** Zip **02816**
4. Business Phone No. **821-4840** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **5538**

7. Brief Description of the Character of Business Conducted in Rhode Island
to engage in the business of buying and selling real estate to otherwise manage real estate

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT)

President Name Lois M. Benjamin Street Address 18 Contentment Drive City Coventry State RI Zip 02816	Vice President Name Ivy M. Darigan Street Address 11 Black Walnut Drive City Coventry State RI Zip 02816
Secretary Name Ivy M. Darigan Street Address 11 Black Walnut Drive City Coventry State RI Zip 02816	Treasurer Name Lois M. Benjamin Street Address 18 Contentment Drive City Coventry State RI Zip 02816

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT)

Director Name Lois M. Benjamin Street Address 18 Contentment Drive City Coventry State RI Zip 02816	Director Name Ivy M. Darigan Street Address 11 Black Walnut Drive City Coventry State RI Zip 02816
Director Name Street Address City State Zip	Director Name Street Address City State Zip

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES
Number of Shares Class/Series Par Value
600 SHS COMM NO PAR VALUE

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES
Number of Shares Class/Series Par Value
not issued

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



File Date: 3.2.98

Check No.: 7322

By: LP

FOR SECRETARY OF STATE USE ONLY

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.

Ivy M. Benjamin 2/26/98
Signature of Officer Date

Lois M. Benjamin

Print or Type Name of Officer

President

Title of Officer



PROFIT CORPORATION ANNUAL REPORT 1997

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **74273** 2. Name of Corporation **BARBARI REALTY, INC.**
3. Street Address Principal Business Office **457 Tiogue Avenue** City **Coventry** State **R.I.** Zip **02816**
4. Business Phone No. **821-4840** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **5538**

7. Brief Description of the Character of Business Conducted in Rhode Island
to engage in the business of buying and selling real estate to otherwise manage real estate

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT)

President Name Lois M. Benjamin	Vice President Name Ivy M. Darigan
Street Address 18 Contentment Drive	Street Address 11 Black Walnut Drive
City Coventry State R.I. Zip 02816	City Coventry State R.I. Zip 02816
Secretary Name Ivy M. Darigan	Treasurer Name Lois M. Benjamin
Street Address 11 Black Walnut Drive	Street Address
City Coventry State R.I. Zip 02816	City Coventry State R.I. Zip 02816

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT)

Director Name Lois M. Benjamin	Director Name Ivy M. Darigan
Street Address 18 Contentment Drive	Street Address 11 Black Walnut Drive
City Coventry State R.I. Zip 02816	City Coventry State R.I. Zip 02816
Director Name	Director Name
Street Address	Street Address
City	City

10. SHARES AUTHORIZED AND ISSUED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES	ISSUED SHARES
Number of Shares	Number of Shares
Class/Series	Class/Series
Par Value	Par Value
600 SHS COMM NO PAR VALUE	not issued

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 7 4 2 7 3 *

File Date: 1/31/97

Check No.: 343

By: [Signature]

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.

Lois M. Benjamin / 1/30/97
Signature of Officer Date

Lois M. Benjamin
Print or Type Name of Officer

President
Title of Officer

PROFIT CORPORATION ANNUAL REPORT

1996



State of Rhode Island and Providence Plantations
James R. Langevin, *Secretary of State*
Corporations Division
100 North Main Street
Providence, Rhode Island 02903-1335 • (401) 277-3040

Filing Period: January 1-March 1
Filing Fee: \$50.00

PLEASE TYPE OR PRINT IN BLACK INK.

1. CORPORATE ID NO. 74273		2. NAME OF CORPORATION? BARBARI REALTY, INC.					
3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE 457 Tiogue Avenue				CITY Coventry	STATE RI	ZIP CODE 02816	
4. BUSINESS PHONE NO. 821-4840			5. STATE OF INCORPORATION RHODE ISLAND			6. SIC CODE 5538	
7. BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE ISLAND to engage in the business of buying and selling real estate to otherwise manage real estate							
8. NAMES AND ADDRESSES OF THE OFFICERS							
PRESIDENT NAME Lois M. Benjamin				VICE PRESIDENT NAME Ivy M. Darigan			
STREET ADDRESS 18 Contentment Drive				STREET ADDRESS 11 Black Walnut Drive			
CITY Coventry	STATE RI	ZIP CODE 02816		CITY Coventry	STATE RI	ZIP CODE 02816	
SECRETARY NAME Ivy M. Darigan				TREASURER NAME Lois M. Benjamin			
STREET ADDRESS 18 Contentment Drive				STREET ADDRESS 11 Black Walnut Drive			
CITY Coventry	STATE RI	ZIP CODE 02816		CITY Coventry	STATE RI	ZIP CODE 02816	
9. NAMES AND ADDRESSES OF THE DIRECTORS							
DIRECTOR NAME Lois M. Benjamin				DIRECTOR NAME Ivy M. Darigan			
STREET ADDRESS 18 Contentment Drive				STREET ADDRESS 11 Black Walnut Drive			
CITY Coventry	STATE RI	ZIP CODE 02816		CITY Coventry	STATE RI	ZIP CODE 02816	
DIRECTOR NAME				DIRECTOR NAME			
STREET ADDRESS				STREET ADDRESS			
CITY	STATE	ZIP CODE		CITY	STATE	ZIP CODE	
10. SHARES AUTHORIZED AND ISSUED							
AUTHORIZED SHARES				ISSUED SHARES			
NUMBER OF SHARES	CLASS / SERIES	PAR VALUE		NUMBER OF SHARES	CLASS / SERIES	PAR VALUE	
600 SHS COMM	NO PAR VALUE			600	COMMON	no par value	

This report must be **SIGNED IN INK** by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, 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.

File Date:

8/8/96

Check No:

5699

By:

Lois Benjamin

For Secretary of State Use Only

Signature of Officer

LOIS M. Benjamin
Print or Type Name of Officer

Title of Officer

President

2/8/96
Date

DETACH BOTTOM BEFORE RETURNING

FORM 31 12/95



ALL ENTRIES MUST BE COMPLETED IN FULL OR THE FORM WILL BE RETURNED.

Corporate ID: 0074273

Annual Report for the year: 1995

Name of Corporation: **BARBARI REALTY, INC.**

Business entity organized under the laws of the State of RI
 For foreign entity, address and telephone number of principal office:

Business Entity is (check one)
 Business Corporation (See RIGL Chapter 7-1.1)
 Professional Service Corporation (See RIGL Chapter 7-5.1)

Phone: ()
 Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box):
 457 Tiogue Avenue
 Coventry, R.I. 02816

Brief statement of the character of business conducted in Rhode Island.
 to engage in the business of buying and selling real estate to otherwise manage real estate

Phone: (401) 821-4840

THE NAMES OF THE OFFICERS ARE:

OFFICER	STREET ADDRESS	CITY/STATE	ZIP CODE
PRESIDENT Kelly J. Ritarossi	8 Jennifer Lane	Coventry, R.I.	02816
VICE-PRESIDENT Ivy M. Dariqan	11 Black Walnut Dr.	Coventry, R.I.	02816
SECRETARY Lois M. Benjamin	18 Contentment Drive	Coventry, R.I.	02816
TREASURER Lois M. Benjamin	18 Contentment Drive	Coventry, R.I.	02816

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
Kelly J. Ritarossi	8 Jennifer Lane	Coventry, R.I.	02816
Ivy M. Dariqan	11 Black Walnut Dr.	Coventry, R.I.	02816
Lois M. Benjamin	18 Contentment Drive	Coventry, R.I.	02816

NUMBER OF SHARES AUTHORIZED (Rider may be attached)		NUMBER OF SHARES ISSUED AND OUTSTANDING (Rider may be attached)	
Number of Shares	Class / Series	Number of Shares	Class / Series
600	Common	Non Issued	

Date: Feb 9, 1995

By: Kelly J. Ritarossi
 PRINT OR TYPE NAME OF OFFICER SIGNING: Kelly J. Ritarossi
 TITLE OF OFFICER SIGNING: President

Form 3 1/95

DESIGNATED REGISTERED AGENT FOR SERVICE OF PROCESS:

PLEASE NOTE: If the registered office and/or registered agent indicated below is incorrect, Form 9 must be filed.

ARTHUR G. CAPALDI
 1035 MAIN STREET
 COVENTRY RI 02816

FILED

MAY 19 1995

By: [Signature]
 1295261

Filing Fee \$50.00
Payable to
Secretary of State

PLEASE TYPE or PRINT
State of Rhode Island and Providence Plantations
Office of The Secretary of State
100 North Main Street
Providence, Rhode Island 02903-1335
401 277-3040

File Annually
LLC Sept 1 - Nov 1
CORP Jan 1 - March 1

Corporate ID: 0074273 Annual Report for the year: 1994

Name of Business Entity: BAREARI REALTY, INC.

Business entity organized under the laws of the State of RI
Business Entity is (check one)

Federal Taxpayer Identification Number: [REDACTED]
 Business Corporation (See RIGL Chapter 7-1.1)
 Professional Service Corporation (See RIGL Chapter 7-5.1)
 Limited Liability Company (See RIGL 7-36)

For foreign entity, address and telephone number of principal office:
N/A
Name, title and mailing address of contact person to whom communications may be directed:
Kelly Ritarossi, President
457 Tiogue Avenue
Coventry, R.I. 02816

Phone: [REDACTED]
Brief statement of the character of business conducted in Rhode Island:
to engage in the business of buying & selling real estate
to otherwise manage real estate

Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box):
457 Tiogue Avenue
Coventry, R.I. 02816

Phone: (401) 821-6840
Date of Organization: October 14, 1993
Date of Qualification to do business in Rhode Island (if foreign entity): [REDACTED]

THE NAMES OF THE OFFICERS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
<input checked="" type="checkbox"/> OFFICER (PRESIDENT, VICE PRESIDENT, SECRETARY, TREASURER) <input checked="" type="checkbox"/> OFFICER (SECRETARY, TREASURER)			
<u>Kelly J. Ritarossi</u>	<u>8 Jennifer Lane</u>	<u>Coventry, R.I.</u>	<u>02816</u>
<input type="checkbox"/> OFFICER (SECRETARY, TREASURER) <input checked="" type="checkbox"/> OFFICER (PRESIDENT, VICE PRESIDENT)			
<u>Ivy M. Darigan</u>	<u>11 Black Walnut Drive</u>	<u>Coventry, R.I.</u>	<u>02816</u>
<input type="checkbox"/> OFFICER (PRESIDENT, VICE PRESIDENT) <input checked="" type="checkbox"/> OFFICER (SECRETARY, TREASURER)			
<u>Lois M. Benjamin</u>	<u>18 Contentment Drive</u>	<u>Coventry, R.I.</u>	<u>02816</u>
<input type="checkbox"/> OFFICER (PRESIDENT, VICE PRESIDENT) <input checked="" type="checkbox"/> OFFICER (SECRETARY, TREASURER)			
<u>Lois H. Benjamin</u>			

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
<u>Kelly J. Ritarossi</u>	<u>8 Jennifer Lane</u>	<u>Coventry, R.I.</u>	<u>02816</u>
<u>Ivy M. Darigan</u>	<u>11 Black Walnut Drive</u>	<u>Coventry, R.I.</u>	<u>02816</u>
<u>Lois M. Benjamin</u>	<u>18 Contentment Drive</u>	<u>Coventry, R.I.</u>	<u>02816</u>

NUMBER OF SHARES AUTHORIZED (if Applicable): _____ NUMBER OF SHARES ISSUED AND OUTSTANDING (if Applicable): _____

NUMBER: 600 NUMBER: None Issued

CLASS: Common CLASS: Common

SERIES: _____ SERIES: _____

PAR VALUE OR WITHOUT PAR: No Par Value PAR VALUE OR WITHOUT PAR: No Par Value

Date: 2/14 19 94 By: Kelly J. Ritarossi

Kelly J. Ritarossi
PRESIDENT (IF NAME OF OFFICE IS MISSING)
President
TITLE OF OFFICER (IF MISSING)

FILED
FEB 23 1994
BY 4549/94

Form 31 1994

DESIGNATED REGISTERED OR RESIDENT AGENT FOR SERVICE OF PROCESS:

PLEASE NOTE: If the Corporation has changed its registered office and/or registered or resident agent, Form 9 or Form LLC-3 must be filed

ARTHUR G. CAPALDI
1035 MAIN STREET
COVENTRY RI 02816