



State of Rhode Island  
**Department of State - Business Services Division**

**FILED**

Annual Report for the year: 2021  
 Corporation \_\_\_\_\_

JAN 07 2021  
 BY 528  
[Signature]

- 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 <u>000120540</u>		2. Exact name of the Corporation <u>LAUD REALTY CORPORATION</u>			
3. Principal Office Address <u>55 PERSHING AVE</u>			City <u>WAKEFIELD</u>	State <u>RI</u>	Zip <u>02879</u>
4. NAICS Code <u>531120</u>		6. Brief description of the character of business conducted in Rhode Island <u>Real estate holding company - lease office space and garage to Verizon Inc.</u>			
5. State of Incorporation <u>RI</u>					
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name <u>DAVID N. LAUDATI</u>			Vice-President Name <u>LARAINÉ LAUDATI</u>		
Street Address <u>55 PERSHING AVE</u>			Street Address <u>49 SUNSET SHORES DR</u>		
City <u>WAKEFIELD</u>	State <u>RI</u>	Zip <u>02879</u>	City <u>NARRAGANSETT</u>	State <u>RI</u>	Zip <u>02882</u>
Secretary Name			Treasurer Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name <u>SAME</u>			Director Name <u>SAME</u>		
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.			NUMBER OF SHARES		
			CLASS/SERIES		
			<u>NONE</u>		
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 <u>DAVID N. LAUDATI</u>					Date <u>1/5/2021</u>
Signature of Authorized Representative <u>[Signature]</u>					