



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

FILED STAMP

ANNUAL REPORT FOR THE YEAR 2021

Corporation

- Filing Period: January 1 - March 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by April 1

JAN 20 2021

BY mea

1. Corporate ID No 001659185		2. Name of Corporation Dowd Realty Group, Ltd.			
3. Street Address Principal Business Office 47 Valley Road			City Middletown	State RI	Zip 02842
5. NAICS Code 531390		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island real estate sales					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Connor H. Dowd			Vice President Name		
Street Address 47 Valley Road			Street Address		
City Middletown	State RI	Zip 02842	City	State	Zip
Secretary Name Connor H. Dowd			Treasurer Name Connor H. Dowd		
Street Address 47 Valley Road			Street Address 47 Valley Road		
City Middletown	State RI	Zip 02842	City Middletown	State RI	Zip 02842
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name			Director Name		
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: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
10. SHARES ISSUED: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.			ISSUED SHARES – THIS SECTION MUST BE COMPLETED		
			Number of Shares	Class/Series	Par Value
			100 common shares \$.01 par value		

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.

Signature

Date

Connor H. Dowd

Print or Type Name

President

Title

MAIL TO:
 Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040