



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year:

Corporation

2021

→ Filing period: January 1 - March 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by April 1.

FEB 24 2021

1. Entity ID Number 000122802		2. Exact name of the Corporation Fletcher Realty Inc.	
3. Principal Office Address 10 Fletcher Ave.		City Cranston	State R.I.
		Zip 02920	
4. NAICS Code 531110	6. Brief description of the character of business conducted in Rhode Island Renta Property		
5. State of Incorporation R.I.			
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐			
President Name Gina Goncalo		Vice-President Name Gina Goncalo	
Street Address 10 Fletcher Ave.		Street Address 10 Fletcher Ave.	
City Cranston	State R.I.	City Cranston	State R.I.
Zip 02920		Zip 02920	
Secretary Name Gina Goncalo		Treasurer Name Gina Goncalo	
Street Address 10 Fletcher Ave.		Street Address 10 Fletcher Ave.	
City Cranston	State R.I.	City Cranston	State R.I.
Zip 02920		Zip 02920	
8. List ALL directors (names and addresses) Check the box to indicate an attachment ☐			
Director Name None		Director Name None	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
Director Name None		Director Name None	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
9. Shares Authorized This information is currently of record in the Department of State. Changes require an additional filing.		10. Shares Issued Check the box to indicate an attachment ☐	
		NUMBER OF SHARES	CLASS/SERIES
		100	Common
			None
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.			
Name of Authorized Representative Gina Goncalo			Date 2-21-2021
Signature of Authorized Representative Gina Goncalo			

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

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