



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

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.

FILED STAMP

FEB 26 2021

BY

1. Entity ID Number 71273		2. Exact name of the Corporation Francis Bros. Realty, Inc.			
3. Principal Office Address 95 Tupelo Street			City Bristol	State Ril	Zip 02809
4. NAICS Code 531390		6. Brief description of the character of business conducted in Rhode Island Dealing in real estate			
5. State of Incorporation RI					
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐					
President Name Theresa Francis			Vice-President Name Theresa Francis		
Street Address 115 Tupelo Road			Street Address 115 Tupelo Road		
City Bristol	State RI	Zip 02809	City Bristol	State RI	Zip 02809
Secretary Name Theresa Francis			Treasurer Name Theresa Francis		
Street Address 115 Tupelo Road			Street Address 115 Tupelo Road		
City Bristol	State RI	Zip 02809	City Bristol	State RI	Zip 02809
8. List ALL directors (names and addresses) Check the box to indicate an attachment ☐					
Director Name Theresa Francis			Director Name		
Street Address 115 Tupelo Road			Street Address		
City Bristol	State RI	Zip 02809	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized			10. Shares Issued Check the box to indicate an attachment ☐		
This information is currently of record in the Department of State. Changes require an additional filing.			NUMBER OF SHARES		
			CLASS/SERIES		
			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.					
Name of Authorized Representative Theresa Francis, President <i>J</i>					Date 2/12/21
Signature of Authorized Representative <i>Theresa Francis</i>					SIGN DOCUMENT HERE

MAIL TO:

Division of Business Services

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

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Website: www.sos.ri.gov