



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2022

Corporation

- Filing period: February 1 - May 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by May 31.

**FILED STAMP**  
 FEB 16 2022  
 BY *[Signature]*  
 DEPT. OF STATE ONLY

1. Entity ID Number <b>506323</b>		2. Exact name of the Corporation <b>Marathon Realty, Inc.</b>									
3. Principal Office Address <b>144 Wayland Avenue</b>			City <b>Providence</b>	State <b>RI</b>	Zip <b>02906</b>						
4. NAICS Code <b>531312</b>		6. Brief description of the character of business conducted in Rhode Island <b>Real estate brokerage, any ancillary purposes, and all other lawful purposes.</b>									
5. State of Incorporation <b>Rhode Island</b>											
7. List ALL officers (names and addresses)					Check the box to indicate an attachment <input type="checkbox"/>						
President Name <b>Stephen M. Brusini</b>			Vice-President Name								
Street Address <b>144 Wayland Avenue</b>			Street Address <b>144 Wayland Avenue</b>								
City <b>Providence</b>	State <b>RI</b>	Zip <b>02906</b>	City <b>Providence</b>	State <b>RI</b>	Zip <b>02906</b>						
Secretary Name <b>Stephen M. Brusini</b>			Treasurer Name <b>Stephen M. Brusini</b>								
Street Address <b>144 Wayland Avenue</b>			Street Address <b>144 Wayland Avenue</b>								
City <b>Providence</b>	State <b>RI</b>	Zip <b>02906</b>	City <b>Providence</b>	State <b>RI</b>	Zip <b>02906</b>						
8. List ALL directors (names and addresses)					Check the box to indicate an attachment <input type="checkbox"/>						
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		10. Shares Issued									
This information is currently of record in the Department of State.		Check the box to indicate an attachment <input type="checkbox"/>									
Changes require an additional filing.		<table border="1"> <thead> <tr> <th>NUMBER OF SHARES</th> <th>CLASS/SERIES</th> <th>PAR VALUE</th> </tr> </thead> <tbody> <tr> <td colspan="3"><b>100 shares of \$.01 par value common stock</b></td> </tr> </tbody> </table>				NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	<b>100 shares of \$.01 par value common stock</b>		
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<b>100 shares of \$.01 par value common stock</b>											
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 <i>Stephen M. Brusini</i>				Date <i>1/31/22</i>							
Signature of Authorized Representative <i>[Signature] President</i>											

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