

**State of Rhode Island  
Office of the Secretary of State**

Fee: \$20.00

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040**Non-Profit Corporation  
Annual Report**

Filing Period: February 1 - May 1

*In accordance with R.I.G.L. 7-6-94, each corporation failing or refusing to file its annual report within the time prescribed by law (R.I.G.L. 7-6-91) is subject to a penalty fee of \$25.00.*

**ANNUAL REPORT YEAR:** 2023**1. Corporate ID No.** 001725103**2. Name of Corporation** JONNYCAKE CENTER REALTY CORPORATION**3. State of Incorporation**State: RI**ARTICLE III**

Using the dropdown labeled NAICS Code below, select the classification title that describes the primary type of activity in which your entity engages. The box to the right of the dropdown will populate a NAICS Code based on the chosen selection. If the NAICS Code is known, enter it into the box on the right. For further assistance with selecting a classification [click here](#).

NAICS Code

624229**4. Principal Office Address**No. and Street: 22 KERSEY ROADCity or Town: SOUTH KINGSTOWNState: RIZip: 02879Country: USA**5. Brief Description of the Character of the Affairs Conducted in Rhode Island**

THE JONNYCAKE CENTER REALTY CORPORATION (THE "CORPORATION") IS ORGANIZED AS A WHOLLY CONTROLLED TITLE HOLDING CORPORATION DESCRIBED IN SECTION 501(C)(2) OF THE INTERNAL REVENUE CODE OF 1986, AS AMENDED, FOR THE EXCLUSIVE PURPOSE OF HOLDING TITLE TO PROPERTY FOR THE BENEFIT OF THE JONNYCAKE CENTER, INC. (THE "JONNYCAKE CENTER"), AN ORGANIZATION EXEMPT FROM FEDERAL INCOME TAX PURSUANT TO SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE OF 1986, AS AMENDED, COLLECTING INCOME THEREFROM AND TURNING OVER THE ENTIRE AMOUNT

THEREOF, LESS THE EXPENSES, TO THE JONNYCAKE CENTER.

**6. Names and Addresses of the Officers and Directors:**

**All Directors and Officers must be listed individually. The number of DIRECTORS of a Rhode Island Corporation shall not be less than 3.**

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
DIRECTOR	JACQUELYN TRACY	22 KERSEY ROAD SOUTH KINGSTOWN, RI 02879 USA
DIRECTOR	ROLAND FIORE	22 KERSEY ROAD SOUTH KINGSTOWN, RI 02879 USA
DIRECTOR	JANE HAYWARD	22 KERSEY ROAD SOUTH KINGSTOWN, RI 02879 USA

**7. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER  
Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78**

DAVID E. MAGLIO, ESQ. 101 DYER STREET SECOND FLOOR PROVIDENCE , RI 02903

**8. This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver, or Trustee.**

**Signed this 1 Day of February, 2023 at 10:58:25 AM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-6.***

By /S/ DAVID E. MAGLIO, ESQ.  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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