



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2023  
Corporation

Amended

FILED  
STAMP  
FEB 27 2023

BY [Signature]

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

1. Entity ID Number <u>000136386</u>		2. Exact name of the Corporation <u>DAVID A. McCauley REAL ESTATE LTD,</u>			
3. Principal Office Address <u>118 Young Drive</u>		City <u>POUNSMOUTH</u>		State <u>R.I.</u>	Zip <u>02871</u>
4. NAICS Code <u>531210</u>		6. Brief description of the character of business conducted in Rhode Island <u>REAL ESTATE SALES, RENTALS, COMMERCIAL LEASING &amp; SERVICE</u>			
5. State of Incorporation <u>RI</u>					
7. List ALL officers (names and addresses) <span style="float:right">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name <u>DAVID McCauley</u>			Vice-President Name <u>N/A</u>		
Street Address <u>118 Young Drive</u>			Street Address		
City <u>POUNSMOUTH,</u>		State <u>RI</u>	Zip <u>02871</u>	City	
Secretary Name <u>N/A</u>			Treasurer Name		
Street Address			Street Address		
City		State	Zip	City	
8. List ALL directors (names and addresses) <span style="float:right">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name			Director Name		
Street Address <u>N/A</u>			Street Address <u>N/A</u>		
City		State	Zip	City	
Director Name			Director Name		
Street Address			Street Address		
City		State	Zip	City	
9. Shares Authorized			10. Shares Issued <span style="float:right">Check the box to indicate an attachment <input type="checkbox"/></span>		
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. <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 <u>DAVID A. McCauley</u>				Date <u>2-23-2023</u>	
Signature of Authorized Representative <u>David McCauley</u>					