



State of Rhode Island

## Department of State - Business Services Division

Annual Report for the year: 2023  
Corporation

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

RECEIVED STAMP  
RI DEPT. OF STATE  
BUSINESS SERVICES DIV.

2023 APR -5 A 9:00

1. Entity ID Number <b>95778</b>		2. Exact name of the Corporation <b>City Line Development, Inc.</b>			
3. Principal Office Address <b>11 Knight Street, Bldg E19</b>			City <b>Warwick</b>	State <b>RI</b>	Zip <b>02886</b>
4. NAICS Code <b>531110</b>		6. Brief description of the character of business conducted in Rhode Island <b>The purchase, sale, leasing and management of real estate and any other lawful business.</b>			
5. State of Incorporation <b>Rhode Island</b>					
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name <b>Earl M. Greco, Jr.</b>			Vice-President Name <b>Kristen Greco</b>		
Street Address <b>11 Knight Street, Bldg E19</b>			Street Address <b>11 Knight Street, Bldg E19</b>		
City <b>Warwick</b>	State <b>RI</b>	Zip <b>02886</b>	City <b>Warwick</b>	State <b>RI</b>	Zip <b>02886</b>
Secretary Name <b>Michael Greco</b>			Treasurer Name <b>Earl M. Greco, Jr.</b>		
Street Address <b>11 Knight Street</b>			Street Address <b>11 Knight Street, Bldg E19</b>		
City <b>Warwick</b>	State <b>RI</b>	Zip <b>02886</b>	City <b>Warwick</b>	State <b>RI</b>	Zip <b>02886</b>
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name <b>None</b>			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 <b>This information is currently of record in the Department of State.</b> <b>Changes require an additional filing.</b>			10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>		
			NUMBER OF SHARES <b>400</b>	CLASS/SERIES <b>Class A Commo</b>	PAR VALUE <b>No Par Value</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 <b>Earl M. Greco, Jr.</b>				Date <b>2/10/2023</b>	
Signature of Authorized Representative				<b>FILED</b>	

APR 05 2023  
BY ML 406