

State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2024 Corporation

→ Filing period: February 1 - May 1 → Filing Fee: \$50.00

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MAR 12	2024 19642
BY	14642

Penalty: Additional \$25. 1. Entity ID Number	Penalty: Additional \$25.00 fee if form is not filed by May 31.							
87196		2. Exact name of the Corporation D & P Realty, Inc.						
	Darr	Calty, Inc.	I C a.		Iciata	17/6		
3. Principal Office Address			City	.illa	State	Zip		
15 Putnam Pike			Green		RI	02828		
4. NAICS Code	6. Brief desc	Brief description of the character of business conducted in Rhode Island						
531110	To acqui	To acquire a general partnership						
5. State of Incorporation		,	•					
Rhode Island								
7. List ALL officers (names and	addresses)			Check the	e box to indicate	an attachment		
President Name Peter J. Sangermano, Jr.			Vice-President Name					
Street Address 715 Putnam Pike			Street Address					
^{City} Greenville	State RI	^{Zip} 02828	City		State	Zip		
Secretary Name	··· <u>-</u> ^ ·	*		Treasurer Name				
Street Address			Street Address					
City	State	Zip	City		State	Zip		
8 List ALL directors (names a	nd addresses)	· · · · · · · · · · · · · · · · · · ·		Check the	e box to indicate	an attachment 🔲		
Director Name			Director Na	ame				
Street Address			Street Address					
Sirect / iddiess				Olice: Address				
City	State	Zip	City		State	Zip		
Director Name			Director Name					
Street Address			Street Address					
City	State	Zıp	City		State	Zip		
			<u> </u>	- 2				
9. Shares Authorized This Information is currently of	record in the	10 Shares Iss NUMBER OF						
Department of State.		200	Commor		No Par Value			
Changes require an additional filing.			Contra					
11. This report must be execut	ted on behalf of the	e corporation by an a	uthorized rea	resentative. If the co	prporation is in t	ne hands of a re-		
ceiver or trustee, this report m	ust be executed o	n behalf of the corpo	ration 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 Date						- 1. / /		
Peter J. Sangermano, Jr.					3/1/24			
Signature of Authorized Representative								
								

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.rl.gov