RI SOS Filing Number: 202450010080 Date: 4/2/2024 4:00:00 PM



State of Rhode Island

## **Department of State - Business Services Division**

FILED

100	n	6	2021

Annual Report fo	r the year:	2024
Cananakian		

Corporation

→ Filing period: February 1 - May 1

→ Penalty: Additional \$25.	.00 fee if form is no	ot filed by May 31.				OU			
Entity ID Number	2. Exact nam	ne of the Corporation	ń						
39214	ROSE F	ROSE REALTY COMPANY							
3. Principal Office Address			City		State	Zip			
232 Warren Avenue			East Prov	vidence	RI	02914			
4. NAICS Code	6. Brief desc	6. Brief description of the character of business conducted in Rhode Island							
531110	Real esta	Real estate and land rentals							
5. State of Incorporation	$\neg$								
RI									
7. List ALL officers (names an	d addresses)	· · · · · · · · · · · · · · · · · · ·		Che	eck the box to ind	licate an attachment 🔲			
President Name Francis A. Rose			Vice-President Name Ernest Agresti, Jr.						
Street Address 232 Warren Avenue			Street Address	Street Address 232Warren Avenue					
<sup>City</sup> East Providence	State RI	Zip()2914	City East Pr		State RI	<sup>Zip</sup> 02914			
Secretary Name Christine Rose Barlow			Treasurer Name Henry D. Rose						
Stree Address 232 Warren Avenue			Street Address	Street Address 232 Warren Avenue					
<sup>City</sup> East Providence	State RI	<sup>Zip</sup> 02914	City East Providence		State RI	<sup>Zip</sup> 02914			
8. List ALL directors (names a	ind addresses)			Che	eck the box to ind	dicate an attachment			
Director Name None			Director Name	None					
Street Address			Street Address						
City	State	Zıp	City		State	Zıp			
Director Name None			Director Name None						
Street Address		Street Address							
City	State	Zıp	City		State	Zip			
9. Shares Authorized 10. Shares I		10. Shares Iss							
This information is currently of Department of State.	record in the		NUMBER OF SHARES		CLASS/SERIES PAR VALUE				
		100	100		1	No Par Value			
Changes require an additional (	filing.		_						
11. This report must be execu	ited on behalf of the	corporation by an	authorized renre	L sentative If the co		e hands of a receiver or			

trustee, this report must be executed on behalf of the corporation 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

Francis A. Rose

Signature of Authorized Representative

Division of Business Services 148 W. River Street. Providence, Rhode Island 02904-2615

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

MAIL TO:

FORM 630 - Revised: 11/2021