



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

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

FILED

APR 12 2024

BY R 11761

1. Entity ID Number <u>62741</u>			2. Exact name of the Corporation <u>WAND M ASSOCIATES, INCORPORATED</u>								
3. Principal Office Address <u>27 FRANCES AVENUE</u>			City <u>NARRAGANSETT</u>	State <u>R.I.</u>	Zip <u>02882</u>						
4. NAICS Code <u>531390</u>		6. Brief description of the character of business conducted in Rhode Island <u>REAL ESTATE RENTAL</u>									
5. State of Incorporation <u>RHODE ISLAND</u>											
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>											
President Name <u>WARREN H RICHARDSON</u>			Vice-President Name <u>MARJORIE ANN RICHARDSON</u>								
Street Address <u>27 FRANCES AVENUE</u>			Street Address <u>27 FRANCES AVENUE</u>								
City <u>NARRAGANSETT</u>	State <u>R.I.</u>	Zip <u>02882</u>	City <u>NARRAGANSETT</u>	State <u>R.I.</u>	Zip <u>02882</u>						
Secretary Name <u>MARJORIE ANN RICHARDSON</u>			Treasurer Name <u>WARREN H. RICHARDSON</u>								
Street Address <u>27 FRANCES AVENUE</u>			Street Address <u>27 FRANCES AVENUE</u>								
City <u>NARRAGANSETT</u>	State <u>R.I.</u>	Zip <u>02882</u>	City <u>NARRAGANSETT</u>	State <u>R.I.</u>	Zip <u>02882</u>						
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>											
Director Name <u>WARREN H. RICHARDSON</u>			Director Name <u>NONE</u>								
Street Address <u>27 FRANCES AVENUE</u>			Street Address								
City <u>NARRAGANSETT</u>	State <u>R.I.</u>	Zip <u>02882</u>	City	State	Zip						
Director Name <u>NONE</u>			Director Name <u>NONE</u>								
Street Address			Street Address								
City	State	Zip	City	State	Zip						
9. Shares Authorized Check the box to indicate an attachment <input type="checkbox"/>											
This information is currently of record in the Department of State. Changes require an additional filing.			10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>								
			<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="width:40%;">NUMBER OF SHARES</th> <th style="width:40%;">CLASS/SERIES</th> <th style="width:20%;">PAR VALUE</th> </tr> <tr> <td><u>30001% PAR VALUE</u></td> <td></td> <td><u>April 9, 2024</u></td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </table>			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	<u>30001% PAR VALUE</u>		<u>April 9, 2024</u>
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<u>30001% PAR VALUE</u>		<u>April 9, 2024</u>									
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. 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 <u>MARJORIE ANN RICHARDSON</u>					Date <u>April 9, 2024</u>						
Signature of Authorized Representative <u>Marjorie Ann Richardson</u>											

MAIL TO:

Division of Business Services

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Website: www.sos.ri.gov