



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.

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RECEIVED
24 APR 17 11:13
FOR
SECRETARY OF STATE
USE ONLY

1. Entity ID Number 000001604		2. Exact name of the Corporation Aud-War Realty Co., Inc.			
3. Principal Office Address 217 Cedar Avenue			City East Greenwich	State RI	Zip 02818
4. NAICS Code 531110		6. Brief description of the character of business conducted in Rhode Island Real estate management.			
5. State of Incorporation RI					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Mark G. Finn			Vice-President Name		
Street Address 217 Cedar Avenue			Street Address		
City East Greenwich	State RI	Zip 02818	City	State	Zip
Secretary Name Mark G. Finn			Treasurer Name Mark G. Finn		
Street Address 217 Cedar Avenue			Street Address 217 Cedar Avenue		
City East Greenwich	State RI	Zip 02818	City East Greenwich	State RI	Zip 02818
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name Mark G. Finn			Director Name		
Street Address 217 Cedar Avenue			Street Address		
City East Greenwich	State RI	Zip 02818	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized 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"/>		
			NUMBER OF SHARES 76	C. ASS/SERIES common	PAR VALUE no par
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 Mark G. Finn				Date 4-2-24	
Signature of Authorized Representative 				FILED	

MAIL TO:
Division of Business Services
148 W River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

APR 17 2024
BY ML 33285