



State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2022

Corporation

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

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

REC'D 2024 SEP 23 11:42 AM

1. Entity ID Number 000012027		2. Exact name of the Corporation Mongeon Realty Inc.												
3. Principal Office Address 781 Iron Mine Hill Rd.			City N. Smithfield	State RI	Zip 02895									
4. NAICS Code 531110		6. Brief description of the character of business conducted in Rhode Island Real Estate Rental												
5. State of Incorporation RI 12/27/78														
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>														
President Name Norbert Mongeon Sr.			Vice-President Name Norbert Mongeon Sr.											
Street Address 781 Iron Mine Hill Rd.			Street Address 781 Iron Mine Hill Rd.											
City N. Smithfield	State RI	Zip 02895	City N. Smithfield	State RI	Zip 02895									
Secretary Name Norbert Mongeon Sr.			Treasurer Name Norbert Mongeon Sr.											
Street Address Same			Street Address Same											
City	State	Zip	City	State	Zip									
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>														
Director Name Norbert Mongeon Sr.			Director Name											
Street Address 781 Iron Mine Hill Rd.			Street Address											
City N. Smithfield	State RI	Zip 02895	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"/>											
			<table border="1"> <thead> <tr> <th>NUMBER OF SHARES</th> <th>CLASS/SERIES</th> <th>PAR VALUE</th> </tr> </thead> <tbody> <tr> <td>200</td> <td>common</td> <td>no par</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table>			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	200	common	no par			
NUMBER OF SHARES	CLASS/SERIES	PAR VALUE												
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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 Norbert Mongeon Jr. Executor for the Estate of Norbert Mongeon Sr.				Date 9/10/2024										
Signature of Authorized Representative 														

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

FILED

SEP 23 2024

FORM 630- Revised: 12/2023

BY 1143