

State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2

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Corporation						ໄດ			
Filing period: February	y 1 - May 1				Ķ	:33: 68:33:			
→ Filing Fee: \$50.00 → Penalty: Additional \$25	00 foo if form is n	at filed by May 21			<u>,</u>	<u> </u>			
1. Entity ID Number		e of the Corporation	1		_				
000012027		Mongeon Realty Inc.							
3. Principal Office Address	<u> </u>		City		State	Zip			
781 Iron Mine Hill Rd.			N. Sm	ithfield	RI	02895			
4. NAICS Code	6. Brief descr	iption of the charact	ter of busines	ss conducted in Rh	ode Island				
531110	Real Esta	Real Estate Rental							
5. State of Incorporation	- I Near Late	ite iventai							
RI 12/27/78	İ								
7. List ALL officers (names an	d addresses)			Check	the box to indi	cate an attachment			
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			RI 02895			
Cossissi Namo		02000							
Norbert Mongeon Sr.			Treasurer Name Norbert Mongeon Sr. Street Address						
Same		Same							
City	State	Zip	City		State	Zip			
8. List ALL directors (names a	nd addresses)	•			the box to indi	cate an attachment 🔲			
Director Name Norbert Mor	ngeon Sr.		Director Na	ame					
Street Address 781 Iron Mir	ne Hill Rd.		Street Add	ress	•				
City N.Smithfield	State RI	^{Zip} 02895	City		State	Zip			
Director Name		Director Nam			эте				
Street Address		 .	Street Add	ress					
City	State	Zip	City		State	Zip			
0.05		40.0							
9. Shares Authorized This information is currently of	record in the	10. Shares Issu NUMBER OF			the box to ind	icate an attachment FAR VALUE			
Department of State. 200		common			no par				
Changes require an additional f	îling.	-							
11. This report must be execut					corporation is	in the hands of a re-			
ceiver or trustee, this report m Under penalty of perjury, I d	ust be executed on	behalf of the corpor	ation by the	receiver or trustee.	ccompanying	schedules and			
statements, and that all state	ements contained	herein are true and	d correct.	t, melaomy any a		, scriedores ario			
Name of Authorized Representative Norbert Mongeon Jr. Executor for the Estate of Norbert Mongeon Sr.					li i	Date 9/10/2024			
Signature of Authorized Reput	1	7		-	<u>_</u>				
1	7//				FILED				
MAIL TO:		/		· ·					

Division of Business Services

148 W. River Street, Providence, Rhode Island 02:04-2615 **Phone:** (401) 222-3040

Website: www.sos.ri.gov

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