



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2611
401.222.3044

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2012

Filing Period: January 1 - March 1 • **Filing Fee:** \$50.00* • **THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.**

* In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

| | |
|------------------------------|--|
| 1. Corporate ID No. 10493 | 2. Name of Corporation Times Realty Co., Inc. |
|------------------------------|--|

| | | | |
|---|--------------------|-------------|--------------|
| 3. Street Address Principal Business Office 361 Atwells Avenue | City Providence | State RI | Zip 02903 |
|---|--------------------|-------------|--------------|

| | |
|---------------------------------------|---|
| 4. Business Phone No. 401-421-4170 | 5. State of Incorporation Rhode Island |
|---------------------------------------|---|

6. Brief Description of the Character of Business Conducted in Rhode Island
Real estate and any lawful purpose

7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

| | |
|--------------------------------------|---|
| President Name Mark U. Gasbarro | Vice President Name Mark U. Gasbarro |
| Street Address 361 Atwells Avenue | Street Address 361 Atwells Avenue |
| City Providence | City Providence |
| State RI | State RI |
| Zip 02903 | Zip 02903 |

| | |
|--------------------------------------|--------------------------------------|
| Secretary Name Mark U. Gasbarro | Treasurer Name Mark U. Gasbarro |
| Street Address 361 Atwells Avenue | Street Address 361 Atwells Avenue |
| City Providence | City Providence |
| State RI | State RI |
| Zip 02903 | Zip 02903 |

8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

| | |
|--------------------------------------|-----------------------|
| Director Name Mark U. Gasbarro | Director Name None |
| Street Address 361 Atwells Avenue | Street Address |
| City Providence | City |
| State RI | State |
| Zip 02903 | Zip |
| Director Name None | Director Name |
| Street Address | Street Address |
| City | City |
| State | State |
| Zip | Zip |

9. SHARES AUTHORIZED

This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.

10. SHARES ISSUED ("X" BOX FOR ATTACHMENT)

| ISSUED SHARES — THIS SECTION MUST BE COMPLETED | | |
|--|--------------|-----------|
| Number of Shares | Class/Series | Par Value |
| 40 | common | No Par |
| | | |

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.

FILED

File Date MAR 13 2012

Check No. By *MUG*

By: 4573

FOR SECRETARY OF STATE USE ONLY

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.

Mark U. Gasbarro 3/3/12

Signature Date

Mark U. Gasbarro

Print or Type Name

President

Title