



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 02904-2615
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2013

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)(4)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 17940		2. Name of Corporation Landry Realty Corp.	
3. Street Address: Principal Business Office 688 Broad Street			
4. Business Phone No. 401-725-5860		5. State of Incorporation Rhode Island	City, State, Zip Central Falls RI 02863-2312
6. Brief Description of the Character of Business Conducted in Rhode Island Realty Lessor			
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name Paul A. Landry		Vice President Name Janine A. Vaccaro	
Street Address 417 Front Street		Street Address 182 High Street	
City Lincoln	State RI	Zip 02865-2428	City, State, Zip Bristol RI 02809-2238
Secretary Name Constance R. McCann		Treasurer Name Constance R. McCann	
Street Address 280 Prospect St.		Street Address 280 Prospect St.	
City Pawtucket	State RI	Zip 02860-4458	City, State, Zip Pawtucket RI 02860-4458
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
Director Name Same as above plus		Director Name Diane R. Blain	
Street Address		Street Address 326 Mendon Road	
City	State	Zip	City, State, Zip Cumberland RI 02864-6214
Director Name		Director Name	
Street Address		Street Address	
City	State	Zip	City, State, Zip
9. SHARES AUTHORIZED			
10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			
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.			
ISSUED SHARES — THIS SECTION MUST BE COMPLETED			
Number of Shares 300	Class/Series Common	Par Value nopar	
300 NO PAR VALUE			

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.

File Date _____
Check No. _____
By: _____
FOR SECRETARY OF STATE USE ONLY

FILED
FEB 28 2013
3290

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.

Signature: Constance R. McCann Date: 2/25/13
Print or Type Name: Constance R. McCann
Title: Corp. Sec./Treasurer