



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.

**FILED**  
 FEB 17 2022  
 BY *[Signature]*

|   |                    |  |   |                                  |                     |
|---|--------------------|--|---|----------------------------------|---------------------|
| 1. Entity ID Number<br><b>0001685860</b>  |                    | 2. Exact name of the Corporation<br><b>Keway Realty Management, Inc.</b>                                     |   |                                  |                     |
| 3. Principal Office Address<br><b>4 Bourget Court</b>   |                    | City<br><b>North Smithfield</b>  |   | State<br><b>RI</b>               | Zip<br><b>02896</b> |
| 4. NAICS Code<br><b>53 1110</b>   |                    | 6. Brief description of the character of business conducted in Rhode Island<br><b>Real Estate Management</b> |   |                                  |                     |
| 5. State of Incorporation<br><b>Rhode Island</b>  |                    |  |   |                                  |                     |
| 7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>  |                    |  |   |                                  |                     |
| President Name<br><b>Wayne Beauchamp</b>  |                    |  | Vice-President Name<br><b>Keith Beauchamp</b>   |                                  |                     |
| Street Address<br><b>4 Bourget Court</b>  |                    |  | Street Address<br><b>46 Angell Road</b>   |                                  |                     |
| City<br><b>North Smithfield</b>   | State<br><b>RI</b> | Zip<br><b>02896</b>  | City<br><b>Narragansett</b>   | State<br><b>RI</b>               | Zip<br><b>02882</b> |
| Secretary Name  |                    |  | Treasurer Name  |                                  |                     |
| Street Address  |                    |  | Street Address  |                                  |                     |
| City  | State              | Zip  | City  | State                            | Zip                 |
| 8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>   |                    |  |   |                                  |                     |
| Director Name   |                    |  | Director Name   |                                  |                     |
| Street Address  |                    |  | Street Address  |                                  |                     |
| City  | State              | Zip  | City  | State                            | Zip                 |
| Director Name   |                    |  | Director Name   |                                  |                     |
| Street Address  |                    |  | Street Address  |                                  |                     |
| City  | State              | Zip  | City  | State                            | Zip                 |
| 9. Shares Authorized<br>This information is currently of record in the Department of State.<br>Changes require an additional filing.  |                    |  | 10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span> |                                  |                     |
|   |                    | NUMBER OF SHARES   | CLASS/SERIES  | PAR VALUE                        |                     |
|   |                    | <b>1000</b>  | <b>CNP</b>  | <b>0</b>                         |                     |
| 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. |                    |  |   |                                  |                     |
| <b>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.</b>                                       |                    |  |   |                                  |                     |
| Name of Authorized Representative<br><b>Wayne Beauchamp</b>   |                    |  |   | Date<br><b>February 14, 2022</b> |                     |
| Signature of Authorized Representative<br><i>Wayne Beauchamp</i>  |                    |  |   |                                  |                     |