RI SOS Filing Number: 202331263860 Date: 3/21/2023 10:40:00 AM

State of Rhode Island

## **Department of State - Business Services Division**

Annual Report for the year: 2021 Corporation

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

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

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<u>.</u>								
1. Entity ID Number		2. Exact name of the Corporation						
000093441	Appraisa	al Resource (	Company,	Inc.				
3. Principal Office Address			City		State	Zip		
847 Main Street		East Gree	enwich	RI	02818			
4. NAICS Code	6. Brief descr	iption of the charact	er of business c	onducted in Rhode	Island			
531320	The rendi	The rendition of real estate appraisal services.						
5. State of Incorporation								
Rhode Island								
7. List ALL officers (names and	addresses)		I.e · ·	Check	the box to i	ndicate an attachment		
President Name Richard K. E	Richard K. Berlinsky			Vice-President Name Richard K. Berlinsky				
Street Address 847 Main Street			Street Address 847 Main Street					
City East Greenwich	State RI	<sup>Zip</sup> 02818	City East Greenwich		State RI	<sup>Zip</sup> 02818		
Secretary Name Richard K. E	Berlinsky		Treasurer Nam	Treasurer Name Richard K. Berlinsky				
Street Address 847 Main Street		Street Address 847 Main Street						
City East Greenwich	State RI	<sup>Zip</sup> 02818	City East Greenwich		State RI	<sup>Zip</sup> 02818		
8. List ALL directors (names ar	nd addresses)				the box to i	ndicate an attachment		
Director Name Richard K. Berlinsky		Director Name						
Street Address 847 Main Street		Street Address						
City East Greenwich	State RI	<sup>Zip</sup> 02818	City	_	State	Zıp		
Director Name	•	•	Director Name		•	•		
Street Address		Street Address						
City	State	Zip	City		State	Zip		
9. Shares Authorized		10. Shares Iss				ndicate an attachment		
This information is currently of record in the Department of State.		NUMBER OF SHARES		CLASS/SERIES PAR VALUE				
				Common		No Par Value		
Changes require an additional fi	ung.							
11. This report must be execut					oration is in	the hands of a receiver or		
trustee, this report must be exe Under penalty of perjury, I de					mnanving s	chedules and		
statements, and that all state	ements contained							
Name of Authorized Represent	tative				Date	/ /		
Richard K. Berlinsky					<u> </u>	21/2123		
Signature of Authorized Representative  FILED								
MAIL TO:	AAAD 9 1 2022							

**Division of Business Services** 

148 W. River Street, Providence, Rhode Island 02904-2615

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