



**State of Rhode Island  
Department of State - Business Services Division**

Annual Report for the year: 2024

**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**  
MAR 07 2024  
BY *[Signature]*

1. Entity ID Number <b>22261</b>	2. Exact name of the Corporation <b>J.R.B. REALTY , INC.</b>
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3. Principal Office Address <b>20 SHARPE DRIVE</b>	City <b>CRANSTON</b>	State <b>RI</b>	Zip <b>02920</b>
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4. NAICS Code <b>531390</b>	6. Brief description of the character of business conducted in Rhode Island <b>ENGAGE IN REAL ESTATE</b>
5. State of Incorporation <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 <b>STEPHANIE RENNARD/TRUSTEE-JOSEPH BACCALA</b>	Vice-President Name <b>RONALD BACCALA-TRUSTEE RONALD BACCALA</b>		
Street Address <b>16 BROOKE CROSSING</b> <small>REVOCABLE</small>	Street Address <b>20 SHARPE DRIVE</b> <small>REVOCABLE</small>		
City <b>LINCOLN</b> State <b>RI</b> Zip <b>02865</b>	City <b>CRANSTON</b> State <b>RI</b> Zip <b>02920</b>		
Secretary Name <b>Geri-Ann Dipaolo-Trustee Ronald Baccala</b>	Treasurer Name <b>Stephanie Rennard/Trustee Joseph Baccala</b>		
Street Address <b>20 SHARPE DRIVE</b> <small>revocable</small>	Street Address <b>16 REDBROOK CROSSING</b> <small>Revocable</small>		
City <b>CRANSTON</b> State <b>RI</b> Zip <b>02920</b>	City <b>LINCOLN</b> State <b>RI</b> Zip <b>02865</b>		

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	City		
State	State		
Zip	Zip		
Director Name	Director Name		
Street Address	Street Address		
City	City		
State	State		
Zip	Zip		

9. Shares Authorized	10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>		
This information is currently of record in the Department of State.	NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
Changes require an additional filing.	<b>300</b>	<b>COMMON</b>	<b>NONE</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.

**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.**

Name of Authorized Representative <b>STEPHANIE RENNARD - TRUSTEE</b>	Date <b>3/26/2024</b>
Signature of Authorized Representative <i>[Handwritten Signature]</i>	