



State of Rhode Island and Providence Plantations  
**Department of State - Business Services Division**

**FILED**

**Annual Report for the year: 2019 Corporation**

**DEC 31 2018**

BY aac 40919

- Filing period: January 1 - March 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by April 1.

1. Entity ID Number 577037		2. Exact name of the Corporation CALLAHAN/HOFFMAN COMPANY, INCORPORATED						
3. Principal Office Address 341 Washington Street				City Norwell		State MA	Zip 02061-0000	
4. NAICS Code 238190		6. Brief description of the character of business conducted in Rhode Island constructing company specializing in commercial building						
5. State of Incorporation MA								
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>								
President Name Garth Hoffman				Vice-President Name Kevin Callahan				
Street Address 341 Washington Street				Street Address 341 Washington Street				
City Norwell		State MA	Zip 02061-		City Norwell		State MA	Zip 02061-
Secretary Name Garth Hoffman				Treasurer Name Kevin Callahan				
Street Address 341 Washington Street				Street Address 341 Washington Street				
City Norwell		State MA	Zip 02061-		City Norwell		State MA	Zip 02061-
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>								
Director Name Garth Hoffman				Director Name Kevin Callahan				
Street Address 341 Washington Street				Street Address 341 Washington Street				
City Norwell		State MA	Zip 02061-		City Norwell		State MA	Zip 02061-
Director Name none				Director Name none				
Street Address none				Street Address none				
City none		State none	Zip none		City none		State none	Zip none
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.  Changes require an additional filing.			NUMBER OF SHARES		CLASS/SERIES		PAR VALUE	
					Common		No Par	
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 Garth Hoffman						Date 1/07/2019		
Signature of Authorized Representative 						SIGN DOCUMENT HERE		