



State of Rhode Island

Department of State - Business Services Division

**STAMP**

Annual Report for the year: 2023

**Corporation**

- Filing period: February 1 - May 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by May 31.

RECEIVED  
R.I. DEPT. OF STATE  
BUS SVCS DIV

FOR  
SECRETARY OF STATE  
USE ONLY

2023 FEB 7 A 10:12

1. Entity ID Number <b>000830040</b>		2. Exact name of the Corporation <b>Chartier Building Company, Inc.</b>			
3. Principal Office Address <b>9 High Meadow Road</b>			City <b>Little Compton</b>	State <b>RI</b>	Zip <b>02837</b>
4. NAICS Code <b>531312</b>		6. Brief description of the character of business conducted in Rhode Island <b>Purchase, hold, develop, improve, rent, and sell real estate</b>			
5. State of Incorporation <b>RI</b>					
7. List ALL officers (names and addresses)					Check the box to indicate an attachment <input type="checkbox"/>
President Name <b>Richard R. Chartier</b>			Vice-President Name		
Street Address <b>9 High Meadow Road</b>			Street Address		
City <b>Little Compton</b>	State <b>RI</b>	Zip <b>02837</b>	City	State	Zip
Secretary Name <b>Richard R. Chartier</b>			Treasurer Name <b>Richard R. Chartier</b>		
Street Address <b>9 High Meadow Road</b>			Street Address <b>9 High Meadow Road</b>		
City <b>Little Compton</b>	State <b>RI</b>	Zip <b>02837</b>	City <b>Little Compton</b>	State <b>RI</b>	Zip <b>02837</b>
8. List ALL directors (names and addresses)					Check the box to indicate an attachment <input type="checkbox"/>
Director Name <b>Richard R. Chartier</b>			Director Name		
Street Address <b>9 High Meadow Road</b>			Street Address		
City <b>Little Compton</b>	State <b>RI</b>	Zip <b>02837</b>	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized			10. Shares Issued		
This information is currently of record in the Department of State.  Changes require an additional filing.			Check the box to indicate an attachment <input type="checkbox"/>		
			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
			<b>200 Common with 0.01 par</b>		
			<b>STK</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.					
<i>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.</i>					
Name of Authorized Representative <b>Richard R. Chartier</b>				Date <b>1-31-2023</b>	
Signature of Authorized Representative 				<b>FILED</b>	

MAIL TO:  
Division of Business Services  
148 W. River Street, Providence, Rhode Island 02904-2615  
Phone: (401) 222-3040  
Website: www.sos.ri.gov

FEB 07 2023  
BY ML 48ETØ