



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State - Division of Business Services

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

Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2013

Filing Period: January 1 - March 1 • This report must be typed or printed legibly.

Filing Fee: \$50.00 • FAILURE TO FILE THIS REPORT BY MARCH 31 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. 000040731		2. Exact name of the Corporation Richard R. Hunt - Architect, Ltd.			
3. Principal office address 26 Old Raccoon Hill Road		City West Greenwich	State RI	Zip 02817	
4. Business Phone No. 401-397-9309		5. State of Incorporation RI			
6. Brief description of the character of business conducted in Rhode Island Architectural Services					
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name Richard R. Hunt			Vice-President Name Richard R. Hunt		
Street Address 26 Old Raccoon Hill Road			Street Address 26 Old Raccoon Hill Road		
City West Greenwich	State RI	Zip 02817	City West Greenwich	State RI	Zip 02817
Secretary Name Richard R. Hunt			Treasurer Name Richard R. Hunt		
Street Address 26 Old Raccoon Hill Road			Street Address 26 Old Raccoon Hill Road		
City West Greenwich	State RI	Zip 02817	City West Greenwich	State RI	Zip 02817
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
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			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
			0		

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.

File Date _____

FILED

Check No _____

By: _____

MAR 27 2013

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.

Richard R. Hunt 03/18/2013
Signature of Authorized Representative Date

FOR SECRETARY OF STATE USE ONLY

BY **6058**

Richard R. Hunt

Print or Type Name of Authorized Representative