



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 2015

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.

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|--|-------------|--|--|--------------|--------------|
| 1. Entity ID No. 112135 | | 2. Exact name of the Corporation Hall Capital Managment Company, Inc. | | | |
| 3. Principal office address 26 Bosworth St., Suite 4 | | City Barrington | State RI | Zip 02806 | |
| 4. Business Phone No. 401-245-0049 | | 5. State of Incorporation Massachusetts | | | |
| 6. Brief description of the character of business conducted in Rhode Island Investment Management Services | | | | | |
| President Name Robert F. Hall | | | Vice-President Name Carol J. McCarthy | | |
| Street Address 7 Tallwood Dr. | | | Street Address 1 Winterbury Ln. | | |
| City Barrington | State RI | Zip 02806 | City Westport | State MA | Zip 02790 |
| Secretary Name Robert F. Hall | | | Treasurer Name | | |
| Street Address 7 Tallwood Dr. | | | Street Address | | |
| City Barrington | State RI | Zip 02806 | City | State | Zip |
| Director Name Robert F. Hall | | | Director Name | | |
| Street Address 7 Tallwood Dr. | | | Street Address | | |
| City Barrington | State RI | Zip 02806 | City | State | Zip |
| Director Name | | | Director Name | | |
| Street Address | | | Street Address | | |
| City | State | Zip | City | State | Zip |
| 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 |
| | | | 1,000 | Common | 0.10 |
| | | | | | |

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.

Max J. Mahoney

02/25/2015

Signature of Authorized Representative

Date

Max J. Mahoney, Attorney

Print or Type Name of Authorized Representative

FILED

Form No. 630
Revised: 01/2012

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