



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2015

Filing Period: January 1 - March 1 • **Filing Fee:** \$50.00* • **THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.**

* In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 114062		2. Name of Corporation H.H. CORPORATION			
3. Street Address Principal Business Office 111 WASHINGTON STREET			City NEWPORT	State RI	Zip 02840
4. Business Phone No. 401 846-5114		5. State of Incorporation RHODE ISLAND			
6. Brief Description of the Character of Business Conducted in Rhode Island To develop and manage real estate					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name WILLIAM J. FITZPATRICK			Vice President Name STEPHEN P. OSTIGUY		
Street Address 111 WASHINGTON STREET			Street Address 111 WASHINGTON STREET		
City NEWPORT	State RI	Zip 02840	City NEWPORT	State RI	Zip 02840
Secretary Name CHRISTINE J. MURPHY			Treasurer Name STEPHEN P. OSTIGUY		
Street Address 111 WASHINGTON STREET			Street Address 111 WASHINGTON STREET		
City NEWPORT	State RI	Zip 02840	City NEWPORT	State RI	Zip 02840
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name WILLIAM J. FITZPATRICK			Director Name CHRISTINE J. MURPHY		
Street Address 111 WASHINGTON STREET			Street Address 111 WASHINGTON STREET		
City NEWPORT	State RI	Zip 02840	City NEWPORT	State RI	Zip 02840
Director Name STEPHEN P. OSTIGUY			Director Name NONE		
Street Address 111 WASHINGTON STREET			Street Address NONE		
City NEWPORT	State RI	Zip 02840	City NONE	State NONE	Zip NONE
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐		
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.			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
			Number of Shares 200	Class/Series COMMON	Par Value NO PAR VALUE

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.

FILED

MAR 18 2015

File Date _____

Check No. _____

By: _____ **BY**

FOR SECRETARY OF STATE USE ONLY

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.

Signature

Date

STEPHEN P. OSTIGUY

Print or Type Name

VICE-PRESIDENT

Title