



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

Secretary of State – Division of Business Services
148 W. River Street
Providence, RI 02904-2615
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2016

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. 000063177		2. Name of Corporation Davenport's Family Restaurant, Inc.			
3. Street Address Principal Business Office 1070 Mendon Road			City Cumberland	State RI	Zip 02864
4. Business Phone No. 401-334-1017		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island Operation of family style restaurant					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Gregg P. Davenport			Vice President Name Gregg P. Davenport		
Street Address 1070 Mendon Road			Street Address 1070 Mendon Road		
City Cumberland	State RI	Zip 02864	City Cumberland	State RI	Zip 02864
Secretary Name Gregg P. Davenport			Treasurer Name Gregg P. Davenport		
Street Address 1070 Mendon Road			Street Address 1070 Mendon Road		
City Cumberland	State RI	Zip 02864	City Cumberland	State RI	Zip 02864
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Gregg P. Davenport			Director Name		
Street Address 1070 Mendon Road			Street Address		
City Cumberland	State RI	Zip 02864	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> 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.			ISSUED SHARES – THIS SECTION MUST BE COMPLETED		
			Number of Shares	Class/Series	Par Value
			500 shares of common stock 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

JAN 14 2016

BY **KL 7743**

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

Gregg P. Davenport

Print or Type Name

President

Title

File Date _____
Check No. _____
By: _____
FOR SECRETARY OF STATE USE ONLY