



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 2016

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. Entry ID No. 00009109		2. Exact name of the Corporation Bates & McDonough, Inc			
3. Principal office address 365 Eddy Street			City Providence	State RI	Zip 02903
4. Business Phone No. 401-273-7710			5. State of Incorporation Rhode Island		
6. Brief description of the character of business conducted in Rhode Island Real Estate Appraisal					
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>					
President Name Mark F. Bates			Vice-President Name Gerard H. McDonough		
Street Address 365 Eddy Street			Street Address 365 Eddy Street		
City Providence	State RI	Zip 02903	City Providence	State RI	Zip 02903
Secretary Name Gerard H. McDonough			Treasurer Name Mark F. Bates		
Street Address 365 Eddy Street			Street Address 365 Eddy Street		
City Providence	State RI	Zip 02903	City Providence	State RI	Zip 02903
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>					
Director Name Mark F. Bates			Director Name Gerard H. McDonough		
Street Address 365 Eddy Street			Street Address 365 Eddy Street		
City Providence	State RI	Zip 02903	City Providence	State RI	Zip 02903
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 checked="" 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
			600	STK	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 _____

Check No _____

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.

FILED

Mark F. Bates 12/10/15
 Signature of Authorized Representative Date

FEB 16 2016

Mark F. Bates
 Print or Type Name of Authorized Representative