



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. Entity ID No. <b>107851</b>		2. Exact name of the Corporation <b>WICKFORD BOOKKEEPING SERVICES, INC</b>			
3. Principal office address <b>143 COUNTRY HILL LANE</b>			City <b>NORTH KINGSTOWN</b>	State <b>RI</b>	Zip <b>02852</b>
4. Business Phone No. <b>401-294-8143</b>			5. State of Incorporation <b>RI</b>		
6. Brief description of the character of business conducted in Rhode Island <b>TO ENGAGE IN ANY BUSINESS OF BOOKKEEPING, ACCOUNTING, AND REAL ESTATE APPRAISALS</b>					
<b>THE FOLLOWING OFFICERS HAVE OWNED THE CORPORATION</b> <input type="checkbox"/>					
President Name <b>JENNIFER L O'NEILL</b>			Vice-President Name <b>GREGG D O'NEILL</b>		
Street Address <b>143 COUNTRY HILL LANE</b>			Street Address <b>143 COUNTRY HILL LANE</b>		
City <b>NORTH KINGSTOWN</b>	State <b>RI</b>	Zip <b>02852</b>	City <b>NORTH KINGSTOWN</b>	State <b>RI</b>	Zip <b>02852</b>
Secretary Name <b>JENNIFER L O'NEILL</b>			Treasurer Name <b>JENNIFER O'NEILL</b>		
Street Address <b>143 COUNTRY HILL LANE</b>			Street Address <b>143 COUNTRY HILL LANE</b>		
City <b>NORTH KINGSTOWN</b>	State <b>RI</b>	Zip <b>02852</b>	City <b>NORTH KINGSTOWN</b>	State <b>RI</b>	Zip <b>02852</b>
<b>THE FOLLOWING INDIVIDUALS HAVE SERVED ON THE BOARD OF DIRECTORS</b> <input type="checkbox"/>					
Director Name <b>NONE</b>			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
<b>SHARES AUTHORIZED</b>			<b>SHARES HELD BY THE CORPORATION</b> <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
			200	COMMON	NONE

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: \_\_\_\_\_  
 FOR SECRETARY OF STATE USE ONLY

**FILED**

FEB 29 2016

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.

*Jennifer L O'Neill* 2/20/16  
 Signature of Authorized Representative Date

**JENNIFER L O'NEILL, PRESIDENT**

Print or Type Name of Authorized Representative

BY 222405