



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. 136923		2. Exact name of the Corporation Gem Management, Inc.			
3. Principal office address One Wellington Road		City Lincoln	State RI	Zip 02865	
4. Business Phone No. 401-831-7000		5. State of Incorporation Rhode Island			
6. Brief description of the character of business conducted in Rhode Island Management, administrative services, and equipment leasing					
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) ☐					
President Name Leonard P. Gemma			Vice-President Name Edward J. Gemma		
Street Address One Wellington Road			Street Address One Wellington Road		
City Lincoln	State RI	Zip 02865	City Lincoln	State RI	Zip 02865
Secretary Name Larry T. Gemma			Treasurer Name Leonard P. Gemma		
Street Address One Wellington Road			Street Address One Wellington Road		
City Lincoln	State RI	Zip 02865	City Lincoln	State RI	Zip 02865
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) ☐					
Director Name Leonard P. Gemma			Director Name Larry T. Gemma		
Street Address One Wellington Road			Street Address One Wellington Road		
City Lincoln	State RI	Zip 02865	City Lincoln	State RI	Zip 02865
Director Name Edward J. Gemma			Director Name None		
Street Address One Wellington Road			Street Address		
City Lincoln	State RI	Zip 02865	City	State	Zip
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.			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
			300	COMMON	\$0.0100

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: _____

FILED

FOR SECRETARY OF STATE USE ONLY MAR 28 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.

Signature of Authorized Representative

Date

Leonard P. Gemma

Print or Type Name of Authorized Representative

BY 270996