RI SOS Filing Number: 201858286710 Date: 2/13/2018 4:00:00 PM

State of Rhode Island and Providence Plantations
**Department of State - Business Services Division**

**Annual Report for the year: 2018**
**Corporation**

→ Filing period: January 1 - March 1
→ Filing Fee: $50.00
→ Penalty: Additional $25.00 fee if form is not filed by April 1.

| 1. Entity ID Number | 2. Exact name of the Corporation |
|---|---|
| 1001415 | Providence Business News, Inc. |

| 3. Principal Office Address | City | State | Zip |
|---|---|---|---|
| 400 Westminster Street, Suite 600 | Providence | RI | 02903 |

| 4. NAICS Code | 6. Brief description of the character of business conducted in Rhode Island |
|---|---|
| 511199 | Publication of the Providence Business News, Inc. |
| 5. State of Incorporation | |
| Massachusetts | |

7. List ALL officers (names and addresses) — Check the box to indicate an attachment ☑

| President Name | Vice-President Name |
|---|---|
| Roger C. Bergenheim | None |
| Street Address: 400 Westminster Street, Suite 600 | Street Address: |
| City: Providence, State: RI, Zip: 02903 | City: , State: , Zip: |
| Secretary Name: Roger C. Bergenheim | Treasurer Name: Roger C. Bergenheim |
| Street Address: 400 Westminster Street, Suite 600 | Street Address: 400 Westminster Street, Suite 600 |
| City: Providence, State: RI, Zip: 02903 | City: Providence, State: RI, Zip: 02903 |

8. List ALL directors (names and addresses) — Check the box to indicate an attachment ☐

| Director Name | Director Name |
|---|---|
| Roger C. Bergenheim | Christopher D. Santilli |
| Street Address: 400 Westminster Street, Suite 600 | Street Address: 400 Westminster Street, Suite 600 |
| 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 — Check the box to indicate an attachment ☐

This information is currently of record in the Department of State.

Changes require an additional filing.

| NUMBER OF SHARES | CLASS/SERIES | PAR VALUE |
|---|---|---|
| 68,800 | Common | $0.05 par |
| 0 | Preferred Series | $100 par |

11. 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.

***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.***

| Name of Authorized Representative | Date |
|---|---|
| Roger C. Bergenheim | 2/8/18 |

Signature of Authorized Representative: Roger C. Bergenheim

SIGN DOCUMENT HERE

**FILED**
FEB 13 2018 KM
BY 324158

**MAIL TO:**
**Division of Business Services**
148 W. River Street, Providence, Rhode Island 02904-2615
**Phone:** (401) 222-3040
**Website:** www.sos.ri.gov

**FORM 630 - Revised: 10/2017**