RI SOS Filing Number: 201858314440 Date: 2/14/2018 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 \$25.0	iu tee it torm is no	ot filed by April 1.					
Entity ID Number	2. Exact nam	2. Exact name of the Corporation					
000122543	The Grer	The Grenier Group, Inc.					
3. Principal Office Address	-		City		State	Zip	
3 Cole Circle			East Green	wich	RI	02818	
4. NAICS Code	6. Brief desc	Brief description of the character of business conducted in Rhode Island					
531390	Real Estate	Real Estate Investment.					
5. State of Incorporation							
RHODE ISLAND							
7 List ALL officers (names and	· ·	Check the box to indicate an attachment					
President Name Timothy Grenier			Vice-President Name				
Street Address 3 Cole Circle			Street Address				
City East Greenwich	State RI	^{Zip} 02818	'		State	Zip	
Secretary Name Timothy Grenier			Treasurer Name Timothy Grenier				
Street Address 3 Cole Circle			Street Address 3 Cole Circle				
City East Greenwich	State RI	^{Zip} 02818	City East Greenwich Sta		State RI	^{Zip} 02818	
8. List ALL directors (names and	d addresses)	•	<u></u>	Che	ck the box to i	ndicate an attachment 🔲	
Director Name NONE			Director Name NONE				
Street Address			Street Address				
City	State	Zip			State	Zıp	
Director Name NONE			Director Name NONE				
Street Address			Street Address				
City	State	Zıp	City		State	Zıp	
9. Shares Authorized		10. Shares Iss		Check the box to indicate an attachment CLASSISFRIES PAR VALUE			
This information is currently of record in the Department of State. Changes require an additional filing.		100	NUMBER OF SHARES		COMMON \$		
11. This report must be execute	d on behalf of the	corporation by an	authorized repre	sentative, If the cor	poration is in t	he hands of a receiver or	
trustee, this report must be exe						 	
Under penalty of perjury, I de statements, and that all state				including any acc	ompanying s	chedules and	
Name of Authorized Representative						1/2/1	
TIMOTHY GRENIER, PRESIDENT							
Signature of Authorized Repres	entative	rensisa DO	CUMENT HERE				
	/						

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov