

FILED

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

**Annual Report for the year:
Corporation**

→ Filing period: January 1 - March 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by April 1.

FEB 26 2018

BY

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1. Entity ID Number 5730		2. Exact name of the Corporation D + H + NC			
3. Principal Office Address 210 Coddington Highway		City Middletown	State RI	Zip 02842	
4. NAICS Code 722511		6. Brief description of the character of business conducted in Rhode Island Restaurant / Brew pub			
5. State of Incorporation RI					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name William S. Christy			Vice-President Name Same		
Street Address 7 Columbia Rd			Street Address		
City Middletown	State RI	Zip 02842	City	State	Zip
Secretary Name Helen Christy			Treasurer Name Same		
Street Address 39 Ward Ave			Street Address		
City Middletown	State RI	Zip 02842	City	State	Zip
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name Dennis W. Christy			Director Name		
Street Address 39 Ward Ave			Street Address		
City Middletown	State RI	Zip 02842	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized This information is currently of record in the Department of State. Changes require an additional filing. 100 No PAR VALUE			10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>		
			NUMBER OF SHARES 100	CLASS/SERIES Common	PAR VALUE No 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 Helen Christy			Date		
Signature of Authorized Representative Helen Christy, Sec			SIGN DOCUMENT FILED		

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Toll-free: 1-800-841-92131
Website: www.sos.ri.gov

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