



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year:
Corporation

2018

→ 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 000092737		2. Exact name of the Corporation CATALPA LTD.	
3. Principal Office Address 84 DUNDAS AVE.		City WARWICK	State RI
		Zip 02889	
4. NAICS Code 61-ED SERVICES	6. Brief description of the character of business conducted in Rhode Island 611710		
5. State of Incorporation RI			
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
President Name THOMAS A. WILSON		Vice-President Name	
Street Address 1231 SWAN LAKE DRIVE #203		Street Address	
City CHARLOTTESVILLE	State VA	Zip 22902	
Secretary Name		Treasurer Name	
Street Address		Street Address	
City	State	Zip	
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
Director Name THOMAS A. WILSON		Director Name	
Street Address 1231 SWAN LAKE DR 203		Street Address	
City CHARLOTTESVILLE	State VA	Zip 22902	
Director Name		Director Name	
Street Address		Street Address	
City	State	Zip	
9. Shares Authorized This information is currently of record in the Department of State. Changes require an additional filing.		10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>	
		NUMBER OF SHARES 0	CLASS/SERIES 0
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 THOMAS A WILSON		Date 2/21/2018	
Signature of Authorized Representative Thomas A Wilson			

FILED

MAIL TO:

Division of Business Services

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Website: www.sos.ri.gov

FEB 27 2018

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FORM 630 - Revised: 10/2017