



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. Rorer Street
Providence, RI 02904-2615
401 222 3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2018

Filing Period: January 1 - March 1 • Filing Fee: \$50.00 • THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.

* in accordance with R.I.G.L. 7-1-2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1-2-1501(c)(4)) is subject to a penalty fee of \$25.00

1. Corporate ID No 144608		2. Name of Corporation 100 Jenkins Street Corporation			
3. Street Address Principal Business Office 100 Jenkins St.			City Providence	State RI	Zip 02906
4. Business Phone No 401.742.7459		5. State of Incorporation RI			
6. Brief Description of the Character of Business Conducted in Rhode Island to own develop & manage real estate 53110					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Leonard J. Long			Vice President Name		
Street Address 100 Jenkins St.			Street Address		
City Prov.	State RI	Zip 02906	City	State	Zip
Secretary Name			Treasurer Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Leonard J. Long			Director Name		
Street Address 100 Jenkins St.			Street Address		
City Prov.	State RI	Zip 02906	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
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.			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
		Number of shares	Class/Series	Par Value	
		1000	common	No. Par	

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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.

FILED KM

File Date: **MAR 05 2018**

Check No. **782**

BY: _____

FOR SECRETARY OF STATE USE ONLY

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: **Leonard J. Long** Date: **3.5.18**

Print or Type Name: **Leonard J. Long**

Title: **president**