RI SOS Filing Number: 201861495350 Date: 4/2/2018 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		• •					
1. Entity ID Number	l l	2. Exact name of the Corporation					
14652	John J. Ne	John J. Neary, Inc.					
3. Principal Office Address			City		State	Zıp	
103 Cottage Street			Pawtucket		RI	02860	
4 NAICS Code	6. Brief desc	ription of the charac	cter of business	conducted in Rhode	Island		
812996	To offer an	To offer and sell Piloting services					
5. State of Incorporation		7					
Rhode Island							
7. List ALL officers (names ar	nd addresses)			Chec	k the box to in	idicate an attachment	
President Name Dorothy M. N	Vice-President Name Dorothy M. Neary						
Street Address 40 Brentwood	Street Address 40 Brentwood Drive						
City Providence	State RI	Zip 02908		City Providence		Zip 02908	
Secretary Name Dorothy M. Neary			Treasurer Name Dorothy M. Neary				
Street Address 40 Brentwood Drive			Street Address 40 Brentwood drive				
City Providence	State RI	Zıp 02908	City Providence		State RI	^{Zıp} 02908	
8. List ALL directors (names a	and addresses)	<u>.</u>	1	Chec	k the bax to in	ndicate an attachment	
Director Name John F. Neary			Director Nam	Dorothy M. Neary	,		
Street Address 103 Cottage S	treet		0.000.7.00.00	ss 40 Brentwood Dr	'iv e		
City Pawtucket	State RI	Zip 02860	City Providence		State RI	Z _{IP} 02908	
Director Name			Director Name				
Street Address			Street Address				
City	State	Zip	City		State	Zip	
9 Shares Authorized		10 Shares Is:	sued	Chec	k the box to in	dicate an attachment	
This information is currently of record in the NUMBER			F SHARES CLASS/SERIES PAR VALUE				
Department of State.		200		Common		No Par	
Changes require an additional filing.							
11 This report must be execu	uted on behalf of the	corporation by an	authorized repre	I sentative. If the corp	ooration is in ti	ne hands of a receiver or	
trustee, this report must be ex					•		
Under penalty of perjury, I o statements, and that all sta				including any acco	mpanying so	hedules and	
Name of Authorized Represe		increm are true ar	74 0011001.		Date		
Dorothy M. Neary					! <u>3</u> /i	28/18	
Signature of Authorized Repr	esentative		<u>(</u>	ILED			
stokalhy 7	n. near	1	8.	ILEU			
	7	1	/A DD				

Division of Business Services

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

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