



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 \$25.00 fee if form is not filed by April 1.

STAMP

FOR
SECRETARY OF STATE
USE ONLY

1. Entity ID Number 122440		2. Exact name of the Corporation The Law Office of John E. MacDonald, Inc.												
3. Principal Office Address One Turks Head Place, Suite 1440			City Providence	State RI	Zip 02903									
4. NAICS Code 541110		6. Brief description of the character of business conducted in Rhode Island Operation of a law office.												
5. State of Incorporation Rhode Island														
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐														
President Name John E. MacDonald			Vice-President Name											
Street Address One Turks Head Place, Suite 1440			Street Address											
City Providence	State RI	Zip 02903	City	State	Zip									
Secretary Name			Treasurer Name											
Street Address			Street Address											
City	State	Zip	City	State	Zip									
8. List ALL directors (names and addresses) Check the box to indicate an attachment ☐														
Director Name			Director Name											
Street Address			Street Address											
City	State	Zip	City	State	Zip									
Director Name			Director Name											
Street Address			Street Address											
City	State	Zip	City	State	Zip									
9. Shares Authorized		10. Shares Issued Check the box to indicate an attachment ☐												
This information is currently of record in the Department of State. Changes require an additional filing.		<table border="1"> <thead> <tr> <th>NUMBER OF SHARES</th> <th>CLASS/SERIES</th> <th>PAR VALUE</th> </tr> </thead> <tbody> <tr> <td>100</td> <td>Common</td> <td>No Par Value</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table>				NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	100	Common	No Par Value			
		NUMBER OF SHARES	CLASS/SERIES	PAR VALUE										
100	Common	No Par Value												
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 John E. MacDonald					Date 9-4-2018									
Signature of Authorized Representative														

SIGN DOCUMENT HERE

FILED

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040

Website: www.sos.ri.gov

SEP 10 2018

BY

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