

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

FILED

JAN 10 2019

Annual Report for the year: 2019
Corporation

→ Filing period: January 1 - March 1

→ Filing Fee: \$50.00

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

BY W101
201

1. Entity ID Number 00011996		2. Exact name of the Corporation JERRY'S SERVICE, Inc.	
3. Principal Office Address 1101 HOPE STREET		City PROVIDENCE	State RI
		Zip 02906	
4. NAICS Code 447190	6. Brief description of the character of business conducted in Rhode Island FULL SERVICE GASOLINE STATION WITH AUTOMOTIVE REPAIR		
5. State of Incorporation RI			
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
President Name PETER BENNETT		Vice-President Name	
Street Address 580 EAST SHORE DRIVE		Street Address	
City SILVER LAKE	State NH	Zip 03875	
Secretary Name M. SUSAN BENNETT		Treasurer Name	
Street Address 580 EAST SHORE DRIVE		Street Address	
City SILVER LAKE	State NH	Zip 03875	
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
Director Name		Director Name	
Street Address		Street Address	
City	State	Zip	
Director Name		Director Name	
Street Address		Street Address	
City	State	Zip	
9. Shares Authorized Check the box to indicate an attachment <input type="checkbox"/>			
This information is currently of record in the Department of State.		10. Shares Issued	
Changes require an additional filing.		NUMBER OF SHARES NONE	CLASS/SERIES 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. <i>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.</i>			
Name of Authorized Representative PETER BENNETT		Date 01/02/19	
Signature of Authorized Representative Peter Bennett			

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040

Website: www.sos.ri.gov