



State of Rhode Island and Providence Plantations
 Department of State - Business Services Division

STAMP

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

1. Corporate ID No 000063177		2. Name of Corporation Davenport's Family Restaurant, Inc.			
3. Street Address Principal Business Office 1070 Mendon Road			City Cumberland	State RI	Zip 02864
4. NAICS Code 722511		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island Operation of family style restaurant					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Gregg P. Davenport			Vice President Name Gregg P. Davenport		
Street Address 1070 Mendon Road			Street Address 1070 Mendon Road		
City Cumberland	State RI	Zip 02864	City Cumberland	State RI	Zip 02864
Secretary Name Gregg P. Davenport			Treasurer Name Gregg P. Davenport		
Street Address 1070 Mendon Road			Street Address 1070 Mendon Road		
City Cumberland	State RI	Zip 02864	City Cumberland	State RI	Zip 02864
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Gregg P. Davenport			Director Name		
Street Address 1070 Mendon Road			Street Address		
City Cumberland	State RI	Zip 02864	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			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 600 shares of common stock no par value	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.

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.

Gregg P. Davenport
 Signature

1/15/19
 Date

Gregg P. Davenport
 Print or Type Name

FILED

President
 Title

JAN 22 2019

BY 10924 DS