



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

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. Entity ID Number 000122255		2. Exact name of the Corporation Hogan & Hogan, Ltd.			
3. Principal Office Address 128 Auburn Drive			City Charlestown	State RI	Zip 02813
4. NAICS Code 812990		6. Brief description of the character of business conducted in Rhode Island To provide legal services by Rhode Island licensed attorneys.			
5. State of Incorporation Rhode Island					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Margaret L. Hogan			Vice-President Name Margaret L. Hogan		
Street Address 128 Auburn Drive			Street Address 128 Auburn Drive		
City Charlestown	State RI	Zip 02813	City Charlestown	State RI	Zip 02813
Secretary Name Margaret L. Hogan			Treasurer Name Margaret L. Hogan		
Street Address 128 Auburn Drive			Street Address 128 Auburn Drive		
City Charlestown	State RI	Zip 02813	City Charlestown	State RI	Zip 02813
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	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 <input type="checkbox"/>			
This information is currently of record in the Department of State. Changes require an additional filing.		NUMBER OF SHARES		CLASS/SERIES	
		500		0.00	
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 Margaret L. Hogan				Date 1/15/19	
Signature of Authorized Representative 		<div style="display: flex; align-items: center; justify-content: center;"> SIGNATURE <div style="text-align: center;"> <p>FILED</p> <p>JAN 22 2019</p> <p>BY <u>9475</u></p> </div> </div>			

MAIL TO:
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