


STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State - Division of Business Services

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

Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2018

Filing Period: January 1 - March 1 - This report must be typed or printed legibly.

Filing Fee: \$50.00 - FAILURE TO FILE THIS REPORT BY MARCH 31 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. 000012285		2. Exact name of the Corporation Tuckahoe Trading Corp.			
3. Principal office address 264 Exeter Rd			City Slocum	State RI	Zip 02877
4. Business Phone No. 401 783 3972			5. State of Incorporation RI		
6. Brief description of the character of business conducted in Rhode Island Farm Real Estate 531190					
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name Linda D. Tucker			Vice-President Name Eve T. Keenan		
Street Address 946E Tuckertown Rd			Street Address 946F Tuckertown Rd.		
City Wakefield	State RI	Zip 02879	City Wakefield	State RI	Zip 02879
Secretary Name Eve T. Keenan			Treasurer Name Linda D. Tucker		
Street Address 946F Tuckertown Rd			Street Address 946E Tuckertown Rd		
City Wakefield	State RI	Zip 02879	City Wakefield	State RI	Zip 02879
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name Linda D. Tucker			Director Name Eve T. Keenan		
Street Address 946E Tuckertown Rd.			Street Address 946F Tuckertown Rd.		
City Wakefield	State RI	Zip 02879	City Wakefield	State RI	Zip 029879
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED			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.			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
			100	common	no par value

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.

File Date _____
Check No _____
By: _____
FOR SECRETARY OF STATE USE ONLY

FILED
JAN 30 2019

 BY **CA HETSA**

11:59

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.

 Signature of Authorized Representative: **Linda D. Tucker** Date: **12/03/2018**

 Print or Type Name of Authorized Representative: **Linda D. Tucker**