



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

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BY **4006**

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. 000031792 | | 2. Name of Corporation Program Development Services, Inc. | | | |
| 3. Street Address Principal Business Office 60 South County Commons Way, Suite G4 | | | City Wakefield | State RI | Zip 02879 |
| 4. NAICS Code 238210 | | 5. State of Incorporation Rhode Island | | | |
| 6. Brief Description of the Character of Business Conducted in Rhode Island Computer programming | | | | | |
| 7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS | | | | | |
| President Name Paul D. Snell | | | Vice President Name Patricia S. Snell | | |
| Street Address 60 South County Commons Way, Suite G4 | | | Street Address 60 South County Commons Way, Suite G4 | | |
| City Wakefield | State RI | Zip 02879 | City Wakefield | State RI | Zip 02879 |
| Secretary Name Paul D. Snell | | | Treasurer Name Paul D. Snell | | |
| Street Address 60 South County Commons Way, Suite G4 | | | Street Address 60 South County Commons Way, Suite G4 | | |
| City Wakefield | State RI | Zip 02879 | City Wakefield | State RI | Zip 02879 |
| 8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS | | | | | |
| Director Name Paul D. Snell | | | Director Name | | |
| Street Address 60 South County Commons Way, Suite G4 | | | Street Address | | |
| City Wakefield | State RI | Zip 02879 | 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 <u>MUST</u> BE COMPLETED | | |
| | | | Number of Shares | Class/Series | Par Value |
| | | | 200 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.

Signature

Date

Paul D. Snell

Print or Type Name

President

Title

MAIL TO:

Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov