RI SOS Filing Number: 201985971970 Date: 2/5/2019 4:00:00 PM



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

RECEIVED SECRETARY OF STATE CORPORATIONS DIV

2019 FEB -5 PM 12: 59

2019 Annual Report for the year:

Corporation

- → Filing period: January 1 March 1
- → Filing Fee \$50.00
- → Penalty: Additional \$25.00 fee if form is not filed by April 1

Entity ID Number	2. Exact nam	2. Exact name of the Corporation					
1001415	Provider	Providence Business News, Inc.					
3. Principal Office Address	incipal Office Address				State	Zip	
400 Westminster Street, Suite 600			Providence		RI	02903	
4. NAICS Code	6. Brief desc	6. Brief description of the character of business conducted in Rhode Island					
511199	Publication of the Providence Business News, Inc.						
State of Incorporation	$\overline{}$						
Massachusetts							
7 List ALL officers (names a	nd addresses)			Сһеск	the box to i	ndicate an attachment 🖸	
President Name Roger C. Be	Vice-President Name None						
Street Address 400 Westmin	Street Address						
City Providence	State RI	Zip 02903	City	State		Zip	
Secretary Name Roger C. Be	Treasurer Name Roger C. Bergenheim						
Street Address 400 Westminster Street, Suite 600			Street Address 400 Westminster Street, Suite 600				
City Providence	State RI	² 1p 02903	City Providence		State RI	^{Zip} 02903	
8. List ALL directors (names	and addresses)				the box to	indicate an attachment 🔲	
Director Name Roger C. Ber	genheim		Director Name	Christopher D. Sai	ntill		
Street Address 400 Westminster Street, Suite 600			Street Address 400 Westminster Street, Suite 600				
City Providence	State RI	Zip 02903	City Providence		State R	Zip 02903	
Director Name	, <u>L</u> ,		Director Name				
Street Address			Street Address		-		
City	State	Zip	City	-	State	Zip	
3. Shares Authorized		10. Shares Issued		Check the box to indicate an attachment			
This information is currently of record in the		NUMBER C		CLASS/SERIES PAR VALUE			
Department of State. Changes require an additional filing.		68,800		Common		\$0.05 par	
		0		Preferred Series \$10		\$100 par	
11 This report must be exec	uted on behalf of the	corporation by an	authorized repres	entative. If the corpo	oration is in	the hands of a receiver or	
trustee, this report must be a Under penalty of perjury, I	declare and affirm	that I have examir	ed this report, in	ustee ncluding any accor	mpanying s	schedules and	
statements, and that all sta Name of Authorized Repress		<u>nerein are true al</u>	no correct.		Date		
Roger C. Bergenheim		1/17/2019					
Signature of Authorized Rep	presentative	· · :)(`	FILE	D			
1692 1 4	<u> </u>		CCD 0.5				

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www sos.ri.gov FER N P SO13

FORM 630 - Revised: 10/2017