



State of Rhode Island and Providence Plantations  
Office of the Secretary of State

Fee: \$50.00

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

Foreign Business Corporation  
Annual Report

Filing Period: January 1 - March 1

In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501 (c&d)) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2019

1. Corporate ID No. 000154092

2. Name of Corporation FORD'S HOMETOWN SERVICES, INC.

3. Street Address Principal Business Office:

No. and Street: 549 GROVE STREET

City or Town: WORCESTER

State: MA

Zip: 01605

Country: USA

4. Business Phone No.

5088524066

5. State of Incorporation

State: MA

ARTICLE III

Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes [here](#). More information on [NAICS](#) can be found online.

561710

6. Brief Description of the Character of Business Conducted in Rhode Island

ALL ASPECTS OF PEST CONTROL SERVICES

7. Names and Addresses of the Officers and Directors:

**All officers and directors must be listed.**

Title	Individual Name	Address
PRESIDENT	CHRISTOPHER G. FORD	Address, City or Town, State, Zip Code, Country 36 CHILTERN DRIVE N. WORCESTER, MA 01609 USA
TREASURER	CHRISTOPHER R. FORD	36 CHILTERN DRIVE N.

		WORCESTER, MA 01609 USA
SECRETARY	MATTHEW R. ANDERSON	2 HERMITAGE LANE WORCESTER, MA 01605 USA
DIRECTOR	CHRISTOPHER R. FORD	36 CHILTERN DRIVE N. WORCESTER, MA 01609 USA
DIRECTOR	GEORGE L. FORD	20 LOVELLS LANE MARSTON MILLS, MA 02648 USA
DIRECTOR	ROBERT E. FORD	211 GROVE ST. PAXTON, MA 01612 USA
DIRECTOR	MATTHEW R. ANDERSON	2 HERMITAGE LANE WORCESTER, MA 01605 USA

**8. Shares Authorized and Issued**

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares <i>Number of Shares</i>	Total Issued and Outstanding <i>Num of Shares</i>
CNP		\$0.0000	1,000.00	0

**9. 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.**

**Signed this 25 Day of February, 2019 at 11:58:56 AM.** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By MATTHEW R. ANDERSON  
Signature of Authorized Representative of the Corporation

Form No. 630  
Revised 09/07

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