State of Rhode Island and Providence Plantations

Department of State - Business Services Division

STAMP

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	2. Exact name of the Corporation
001679997	Commercial Resources, Inc.

3. Principal Office Address	City	State	Zip
875 Centreville Road, Building 2, Suite 6	Warwick	RI	02886

4. NAICS Code	6. Brief description of the character of business conducted in Rhode Island
523930	Investment Consulting
5. State of Incorporation	
Rhode Island	

7. List ALL officers (names and addresses) — Check the box to indicate an attachment ☐

President Name	Vice-President Name
James M. Roche	
Street Address: 21 Valley Brook Drive	Street Address:
City: East Greenwich, State: RI, Zip: 02818	City: , State: , Zip:
Secretary Name: James M. Roche	Treasurer Name: James M. Roche
Street Address: 21 Valley Brook Drive	Street Address: 21 Valley Brook Drive
City: East Greenwich, State: RI, Zip: 02818	City: East Greenwich, State: RI, Zip: 02818

8. List ALL directors (names and addresses) — Check the box to indicate an attachment ☐

Director Name	Director Name
James M. Roche	
Street Address: 21 Valley Brook Drive	Street Address:
City: East Greenwich, State: RI, Zip: 02818	City: , State: , Zip:
Director Name:	Director Name:
Street Address:	Street Address:
City: , State: , Zip:	City: , State: , Zip:

9. Shares Authorized

This Information is currently of record in the Department of State.

Changes require an additional filing.

10. Shares Issued — Check the box to indicate an attachment ☐

NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
500	A	$1.00

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	Date
James M. Roche	1-18-2019

Signature of Authorized Representative: SIGN DOCUMENT HERE

FILED
FEB 25 2019
BY 4460494892 DS

MAIL TO:
Division of Business Services
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