



State of Rhode Island and Providence Plantations

## Department of State - Business Services Division

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 <b>135039</b>		2. Exact name of the Corporation <b>South County Holdings, Inc.</b>												
3. Principal Office Address <b>55 Village Square Drive</b>			City <b>Wakefield</b>	State <b>RI</b>	Zip <b>02879</b>									
4. NAICS Code <b>713940</b>		6. Brief description of the character of business conducted in Rhode Island <b>To own, operate and maintain an exercise, health and fitness center and gymnasium.</b>												
5. State of Incorporation <b>RI</b>														
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>														
President Name <b>Michael Petrella</b>			Vice-President Name											
Street Address <b>55 Village Square Drive</b>			Street Address											
City <b>Wakefield</b>	State <b>RI</b>	Zip <b>02879</b>	City	State	Zip									
Secretary Name <b>Michael Petrella</b>			Treasurer Name <b>Michael Petrella</b>											
Street Address <b>55 Village Square Drive</b>			Street Address <b>55 Village Square Drive</b>											
City <b>Wakefield</b>	State <b>RI</b>	Zip <b>02879</b>	City <b>Wakefield</b>	State <b>RI</b>	Zip <b>02879</b>									
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>														
Director Name <b>Michael Petrella</b>			Director Name											
Street Address <b>55 Village Square Drive</b>			Street Address											
City <b>Wakefield</b>	State <b>RI</b>	Zip <b>02879</b>	City	State	Zip									
Director Name			Director Name											
Street Address			Street Address											
City	State	Zip	City	State	Zip									
9. Shares Authorized <b>This information is currently of record in the Department of State.</b> <b>Changes require an additional filing.</b>			10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>											
			<table border="1"> <thead> <tr> <th>NUMBER OF SHARES</th> <th>C. ASS. SERIES</th> <th>PAR VALUE</th> </tr> </thead> <tbody> <tr> <td><b>200</b></td> <td><b>Common</b></td> <td><b>No Par</b></td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table>			NUMBER OF SHARES	C. ASS. SERIES	PAR VALUE	<b>200</b>	<b>Common</b>	<b>No Par</b>			
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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.														
<b>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.</b>														
Name of Authorized Representative <b>Michael Petrella</b>			Date <b>2-26-19</b>											
Signature of Authorized Representative 			<b>FILED</b> <b>MAR 08 2019</b> <b>7726 DS</b> <b>BY</b>											

MAIL TO:  
 Division of Business Services  
 148 W. River Street, Providence, Rhode Island 02904-2615  
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 Website: [www.sos.ri.gov](http://www.sos.ri.gov)