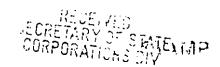
RI SOS Filing Number: 201989405390 Date: 3/27/2019 4:00:00 PM



State of Rhode Island and Providence Plantations

## **Department of State - Business Services Division**

Annual Report for the year: 2019 Corporation



2019 MAR 28 AM 8: 58

$\rightarrow$	Filing	period <sup>1</sup>	January	1	- March	1
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→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00	tee if form is no	t filed by April 1.								
1 Entity ID Number	2 Exact name of the Corporation									
795461	B. Brown Construction Inc.									
3. Principal Office Address	<u> </u>	•	City		State	Zip				
270 Burnt Hill Road			Scituate		RI	02831				
4 NAICS Code	6. Brief descr	iption of the charac	ter of business o	conducted in Rhode I	<u> </u>	l .				
237990	Excavation/site work/real estate development									
5. State of Incorporation	State of Incorporation									
Rhode Island										
7. List ALL officers (names and a	iddresses)	••		Check	the box to i	ndicate an attachment				
President Name Brian P. Brown	Vice-President Name Lori A. Brown									
Street Address 270 Burnt Hill Ro	Street Address 270 Burnt Hill Road									
City Scituate	State RI	Zip 02831		City Scituate		<sup>Zip</sup> 02831				
Secretary Name Lori A. Brown		Treasurer Name Brian P. Brown								
Street Address 270 Burnt Hill Ro	Street Address 270 Burnt Hill Road									
City Scituate	State RI	<sup>Zip</sup> 02831	Cily Scituate		State RI	Z <sub>IP</sub> 02831				
8. List ALL directors (names and	addresses)		•	Check	the box to 11	ndicate an attachment 🔲 :				
Director Name Brian P. Brown	Director Name Lori A. Brown									
Street Address 270 Burnt Hill Ro	Street Address 270 Burnt Hill Road									
City Scituate	State RI	Zip 02831	City Scituate		State RI	Zip 02831				
Director Name	<del>\</del>	Director Name								
Street Address	······································	Street Address								
Crty	State	Zıp	City		State	Zıp				
Shares Authorized		10. Shares Iss	ued	Check	the box to u	ndicate an attachment				
This information is currently of rec	NUMBER OF		CLASS/SER'ES PAR VALUE							
Department of State.		600		common		None				
Changes require an additional filin	ıg.									
11 This report must be executed	on behalf of the	corporation by an a	uthorized repres	I sentative. If the corpo	oration is in t	he hands of a receiver or :				
trustee, this report must be exec										
Under penalty of perjury, I dec statements, and that all statem				ncluding any accor	npanying s	chedules and				
Name of Authorized Representat		nerem are aue an	a conect.		Date					
Brian P. Brown, President 3-26-19										
Signature of Authorized Represe	ntative	SIGN DO	of (LED or		•					

MAIL TO:

**Division of Business Services** 

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

Phone: (401) 222-3040 Website: www.sos.n.gov

FORM 630 - Revised: 10/2017