RI SOS Filing Number: 201918701980 Date: 9/6/2019 4:00:00 PM RECEIVED

RECEIVED

R.I. DEPT. OF STATE

BUS S/US DIV



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

2019 SEP -65PA4:08

Annual Report for the year: 2019

Corporation

→ Filing period: January 1 - March 1

→ Filing Fee: \$50.00

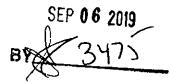
→ Penalty: Additional \$2	5.00 fee if form is n	ot filed by April 1.					
1. Entity ID Number 000158277		2. Exact name of the Corporation S.J. O'Neil Painting, Incorporated					
3. Principal Office Address 9 Sykes Street			City Warwi ck		State RI	Zip • 02886	
4. NAICS Code 238320		6. Brief description of the character of business conducted in Rhode Island Painting Company					
5. State of Incorporation Rhode Island							
7. List ALL officers (names a	nd addresses)			Che	ck the box to in	ndicate an attachment 🗖	
President Name Stephen J. C	Vice-President Name Ingrid O'Neil						
Street Address 9 Sykes Stree	Street Address 9 Sykes Street						
City Warwick	State RI	Zip 02886	City Warwick		State RI	State RI Zip 02886	
Secretary Name Stephen J. O'Neil III			Treasurer Name Stephen J. O'Neil III				
Street Address 9 Sykes Street			Street Address 9 Sykes Street				
City Warwick	State RI	Zip 02886	City Warwick		State RI	^{Zip} 02886	
8. List ALL directors (names	and addresses)			Che	eck the box to in	ndicate an attachment	
Director Name	Director Name						
Street Address			Street Address				
City	State	Zıp	City		State	Zıp	
Director Name			Director Name				
Street Address			Street Address				
City	State	Zıp	City		State	Zip	
9. Shares Authorized		10. Shares Is	Lsued	Che	ck the box to in	ndicate an attachment	
This information is currently of record in the Department of State. Changes require an additional filing.			F SHARES	C: ASS/SERIES PAR VALUE			
		1000		CWP		.01	
Cuanges reduire an auditional	ining.						
11. This report must be exec	uted on behalf of the	corporation by an	authorized repres	entative. If the co	rporation is in t	he hands of a receiver or	
trustee, this report must be e Under penalty of perjury, I	xecuted on behalf o	f the corporation by	the receiver or tr	ustee.		t-datad	
statements, and that all sta				ncluding any acc	ompanying so	nequies and	
Name of Authorized Representative					Date	Date	
Stephen J. O'Neil, (II					9-6-2019		
Signature of Aluthorized Repu	resentative	SIGN DO	CUMENT H	ED			
11/	•		- 01				

MAIL TO:

Division of Business Services

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

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



FORM 630 - Revised: 10/2017