



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 001680467		2. Exact name of the Corporation Gunter Group, Inc.	
3. Principal Office Address 99 Fosdyke St		City Providence	State RI
		Zip 02906	
4. NAICS Code 541611	6. Brief description of the character of business conducted in Rhode Island Business Consulting Services		
5. State of Incorporation RI			
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
President Name Susan Gunter		Vice-President Name Geoffrey Gunter	
Street Address 99 Fosdyke St		Street Address 99 Fosdyke St	
City Providence	State RI	City Providence	State RI
Zip 02906		Zip 02906	
Secretary Name None		Treasurer Name None	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
Director Name None		Director Name None	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
Director Name None		Director Name None	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
9. Shares Authorized		10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>	
This information is currently of record in the Department of State. Changes require an additional filing.		NUMBER OF SHARES	CLASS/SERIES
		PAR VALUE	
		1,000	STK
			\$ 0.01
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 Susan Gunter		Date 9/28/2019	
Signature of Authorized Representative 		<div style="text-align: center;"> FILED SIGN DOCUMENT HERE OCT 07 2019 </div>	

MAIL TO:
Division of Business Services
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