



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: 2020

Corporation

→ Filing period: January 1 - March 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by April 1.

FILED

JAN 09 2020

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14073

1. Entity ID Number 125893		2. Exact name of the Corporation BRASWELL'S PLUMBING AND HEATING, INC.			
3. Principal Office Address 205 TEN ROD ROAD			City NORTH KINGSTOWN	State RI	Zip 02852
4. NAICS Code 423720		6. Brief description of the character of business conducted in Rhode Island COMMERCIAL AND RESIDENTIAL PLUMBING AND HEATING CONTRACTING.			
5. State of Incorporation RHODE ISLAND					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name BILLY D BRASWELL			Vice-President Name SAME AS PRESIDENT		
Street Address 205 TEN ROD ROAD			Street Address		
City NORTH KINGSTOWN	State RI	Zip 02852	City	State	Zip
Secretary Name LYNNE B. BRASWELL			Treasurer Name SAME AS PRESIDENT		
Street Address 205 TEN ROD ROAD			Street Address		
City NORTH KINGSTOWN	State RI	Zip 02852	City	State	Zip
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name NONE			Director Name		
Street Address			Street Address		
City	State	Zip	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 <input type="checkbox"/>		
			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
			100	COMMON	\$.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 BILLY D. BRASWELL				Date 12/17/2019	
Signature of Authorized Representative <i>Billy D Braswell</i>					