



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

FILED

JAN 13 2020

BY 1266 DS

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.

1. Entity ID Number 1658442		2. Exact name of the Corporation Hodess Property Management, Inc.												
3. Principal Office Address 100 John L. Dietsch Square			City N. Attleboro	State MA	Zip 02763									
4. NAICS Code 531110		6. Brief description of the character of business conducted in Rhode Island Property management company.												
5. State of Incorporation Massachusetts														
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>														
President Name Blake G. Hodess			Vice-President Name Brian K. Hodess											
Street Address 100 John L. Dietsch Square			Street Address 100 John L. Dietsch Square											
City N. Attleboro	State MA	Zip 02763	City N. Attleboro	State MA	Zip 02763									
Secretary Name Blake G. Hodess			Treasurer Name Claude L. Levesque											
Street Address 100 John L. Dietsch Square			Street Address 100 John L. Dietsch Square											
City N. Attleboro	State MA	Zip 02763	City N. Attleboro	State MA	Zip 02763									
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>														
Director Name Blake G. Hodess			Director Name Brian K. Hodess											
Street Address 100 John L. Dietsch Square			Street Address 100 John L. Dietsch Square											
City N. Attleboro	State MA	Zip 02763	City N. Attleboro	State MA	Zip 02763									
Director Name Claude L. Levesque			Director Name											
Street Address 100 John L. Dietsch Square			Street Address											
City N. Attleboro	State MA	Zip 02763	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"/>											
			<table border="1"> <thead> <tr> <th>NUMBER OF SHARES</th> <th>CLASS/SERIES</th> <th>PAR VALUE</th> </tr> </thead> <tbody> <tr> <td>100</td> <td>Common</td> <td>No Par Value</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table>			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	100	Common	No Par Value			
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100	Common	No Par Value												
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 Blake G. Hodess, President				Date 12-26-19										
Signature of Authorized Representative 														