



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State - Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040 - Email: corporations@sos.ri.gov - Website: www.sos.ri.gov

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2020

Filing Period: January 1 - March 1 • This report must be typed or printed legibly.

Filing Fee: \$50.00 • FAILURE TO FILE THIS REPORT BY MARCH 31 WILL RESULT IN A \$25.00 PENALTY FEE

1. Entity ID No. 4449		2. Exact name of the Corporation H.V. Collins Properties, Inc.	
3. Principal office address 99 Gano Street		City Providence	State RI
		Zip 02906	
4. Business Phone No (401) 421-4080		5. State of Incorporation Rhode Island	
6. Brief description of the character of business conducted in Rhode Island Distribution of general contracting business # 238990			
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) 0			
President Name Henry V. Collins, Jr.		Vice-President Name Patrick G. Collins	
Street Address 99 Gano Street		Street Address 99 Gano Street	
City Providence	State RI	City Providence	State RI
Zip 02906		Zip 02906	
Secretary Name Eloise G. Collins		Treasurer Name Henry V. Collins, Jr.	
Street Address 99 Gano Street		Street Address 99 Gano Street	
City Providence	State RI	City Providence	State RI
Zip 02906		Zip 02906	
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) 1 J			
Director Name Henry V. Collins, Jr.		Director Name Patrick G. Collins	
Street Address 99 Gano Street		Street Address 99 Gano Street	
City Providence	State RI	City Providence	State RI
Zip 02906		Zip 02906	
Director Name Eloise G. Collins		Director Name	
Street Address 99 Gano Street		Street Address	
City Providence	State RI	City	State
Zip 02906		Zip	
9. SHARES AUTHORIZED		10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) 1 J	
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.		NUMBER OF SHARES	CLASS/SERIES
		PAR VALUE	
		990	Class A non voting
		10	Class A Voting
			No par value
			No par value

File Date _____

Check No _____

By: _____

FOR SECRETARY OF STATE USE ONLY

FILED

JAN 21 2020

BY **S3V4W**

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.

Signature of Authorized Representative

Date

Henry V. Collins, Jr., President

Print or Type Name of Authorized Representative