RI SOS Filing Number: 202034144240 Date: 2/10/2020 4:00:00 PM

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

FILED
FEB 10 2020
BY 135822

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	2 Exact name of the Corporation
000001894	**Bald Hill Realty Co.**

3 Principal Office Address	City	State	Zip
1035 Bald Hill Road	**Warwick**	**RI**	**02886**

4 NAICS Code	6 Brief description of the character of business conducted in Rhode Island
453310	**Purchase, Sale and/or Lease of Motor Vehicles.**
5 State of Incorporation: **Rhode Island**	

7 List ALL officers (names and addresses) — Check the box to indicate an attachment ☐

President Name: **James E. Hagan**			Vice-President Name: **Robert G. Petrarca**		
Street Address: **4 Spring Street**			Street Address: **584 Cowesett Rd**		
City: **Narragansett**	State: **RI**	Zip: **02882**	City: **Warwick**	State: **RI**	Zip: **02886**
Secretary Name: **James E. Hagan**			Treasurer Name: **Robert G. Petrarca**		
Street Address: **4 Spring Street**			Street Address: **584 Cowesett Rd**		
City: **Narragansett**	State: **RI**	Zip: **02882**	City: **Warwick**	State: **RI**	Zip: **02886**

8 List ALL directors (names and addresses) — Check the box to indicate an attachment ☐

Director Name: **James E. Hagan**			Director Name: **Robert G. Petrarca**		
Street Address: **4 Spring Street**			Street Address: **584 Cowesett Rd**		
City: **Narragansett**	State: **RI**	Zip: **02886**	City: **Warwick**	State: **RI**	Zip: **02886**
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip

9 Shares Authorized — 10 Shares Issued — Check the box to indicate an attachment ☐

This information is currently of record in the Department of State.

Changes require an additional filing.

NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
2050	**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	Date
James E. Hagan	1-29-20

Signature of Authorized Representative: James E. Hagan — SIGN DOCUMENT HERE

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