



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**

FEB 10 2020

BY 135822

1 Entity ID Number <b>000001894</b>		2 Exact name of the Corporation <b>Bald Hill Realty Co.</b>			
3 Principal Office Address <b>1035 Bald Hill Road</b>		City <b>Warwick</b>		State <b>RI</b>	Zip <b>02886</b>
4 NAICS Code <b>453310</b>		6 Brief description of the character of business conducted in Rhode Island <b>Purchase, Sale and/or Lease of Motor Vehicles.</b>			
5 State of Incorporation <b>Rhode Island</b>					
7 List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name <b>James E. Hagan</b>			Vice-President Name <b>Robert G. Petrarca</b>		
Street Address <b>4 Spring Street</b>			Street Address <b>584 Cowesett Rd</b>		
City <b>Narragansett</b>	State <b>RI</b>	Zip <b>02882</b>	City <b>Warwick</b>	State <b>RI</b>	Zip <b>02886</b>
Secretary Name <b>James E. Hagan</b>			Treasurer Name <b>Robert G. Petrarca</b>		
Street Address <b>4 Spring Street</b>			Street Address <b>584 Cowesett Rd</b>		
City <b>Narragansett</b>	State <b>RI</b>	Zip <b>02882</b>	City <b>Warwick</b>	State <b>RI</b>	Zip <b>02886</b>
8 List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name <b>James E. Hagan</b>			Director Name <b>Robert G. Petrarca</b>		
Street Address <b>4 Spring Street</b>			Street Address <b>584 Cowesett Rd</b>		
City <b>Narragansett</b>	State <b>RI</b>	Zip <b>02886</b>	City <b>Warwick</b>	State <b>RI</b>	Zip <b>02886</b>
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized					
10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
This information is currently of record in the Department of State.  Changes require an additional filing.		NUMBER OF SHARES <b>2050</b>		CLASS/SERIES <b>Common</b>	PAR VALUE <b>No Par Value</b>
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					
<b>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.</b>					
Name of Authorized Representative <b>James E. Hagan</b>				Date <b>1-29-20</b>	
Signature of Authorized Representative <i>James E. Hagan</i>				SIGN DOCUMENT HERE	

MAIL TO:  
Division of Business Services  
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Phone: (401) 222-3040  
Website: www.sos.ri.gov