RI SOS Filing Number: 202034995950 Date: 2/20/2020 4:00:00 PM



State of Rhode Island and Providence Plantations

## **Department of State - Business Services Division**

FILED

FEB 2 0 2020

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					
000009064	J.J. McN	J.J. McNAMARA & SONS, INC., ELECTRICAL CONTRACTORS					
3. Principal Office Address			City		State	Zip	
215 Niantic Avenue			Cranston		RI	02907	
4. NAICS Code	6. Brief desc	ription of the chara	cter of business c	onducted in Rhode I	sland		
238210	Electrical C	Electrical Contractors					
5. State of Incorporation	$\neg$						
Rhode Island							
7. List ALL officers (names a	and addresses)			Check	the box to	indicate an attachment	
President Name Robert McNa	Vice-President	Vice-President Name Robert McNamara					
Street Address 215 Niantic A	Street Address 215 Niantic Avenue						
City Cranston	State RI	<sup>Zip</sup> 02907	City Cranston		State RI	State RI Zip 02907	
Secretary Name				Treasurer Name			
Street Address			Street Address	Street Address			
City	State	Zip	City		State	State Zip	
8. List ALL directors (names	and addresses)			Check	the box to i	indicate an attachment	
Director Name			Director Name				
Street Address			Street Address	Street Address			
City		Zip	City		State Zip		
Director Name			Director Name				
Street Address			Street Address				
<u> </u>	· · · ·	<del></del>					
City	State	Zip	City		State	Zip	
9. Shares Authorized 10.						indicate an attachment  PAR VALUE	
This information is currently of record in the Department of State.			OF SHARES	CLASS/SERIE	CLASS/SERIES		
		150		Common		No-Par	
Changes require an additiona	J filing.						
11. This report must be exec	cuted on behalf of the	corporation by an	authorized repres	sentative. If the corpo	oration is in	the hands of a receiver or	
trustee, this report must be e	<u>executed on behalf of</u>	f the corporation by	the receiver or tri	ustee.			
Under penalty of perjury, I statements, and that all st	- deciare and aπirm : Patements contained	that i have examin i herein are true a	ied this report, ir nd correct	ncluding any accon	npanying s	chedules and	
Name of Authorized Represe	entative	Heielli Bio Cao C.	na correct.		Date	<del>, / / /</del>	
Robert McNamara		2/14/2020					
Signature of Authorized Rep	recentative  August	SIGN DC	DOUMENT 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