



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 21 2020

BY 1166 OS

1. Entity ID Number 6714		2. Exact name of the Corporation J.B. FOLEY PRINTING COMPANY, INC.			
3. Principal Office Address 999 Chalkstone Avenue			City Providence	State RI	Zip 02908
4. NAICS Code 323111		6. Brief description of the character of business conducted in Rhode Island Printing business			
5. State of Incorporation Rhode Island					
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐					
President Name Thomas P. Giammatteo, Jr.			Vice-President Name		
Street Address 1469 Broad Street			Street Address		
City Providence	State RI	Zip 02905	City	State	Zip
Secretary Name Thomas P. Giammatteo, Jr.			Treasurer Name Thomas P. Giammatteo, Jr.		
Street Address 1469 Broad Street			Street Address 1469 Broad Street		
City Providence	State RI	Zip 02905	City Providence	State RI	Zip 02905
8. List ALL directors (names and addresses) Check the box to indicate an attachment ☐					
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
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		
			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 Thomas P. Giammatteo					Date 2/3/20
Signature of Authorized Representative <i>Thomas P. Giammatteo</i>					

MAIL TO:

Division of Business Services

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