



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

 RECEIVED
 R.I. DEPT. OF STATE
 BUS SVCS DIV

 Annual Report for the year: 2020
 Corporation

2020 MAR 10 A 11:48

- 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 000148148 | | 2. Exact name of the Corporation Lustig, Glaser & Wilson, P.C. | | | |
| 3. Principal Office Address P.O. Box 56 | | | City Newton | State MA | Zip 02464 |
| 4. NAICS Code 54110 54 - Professional, Scientific, and | | 6. Brief description of the character of business conducted in Rhode Island The corporation was, until December 2018, engaged in the general practice of law (with a concentration in collection law). The firm no longer transacts business in Rhode Island. | | | |
| 5. State of Incorporation Massachusetts | | | | | |
| 7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/> | | | | | |
| President Name Kenneth C. Wilson | | | Vice-President Name | | |
| Street Address P.O. Box 56 | | | Street Address | | |
| City Newton | State MA | Zip 02464 | City | State | Zip |
| Secretary Name Ronald E. Lustig | | | Treasurer Name Ronald E. Lustig | | |
| Street Address P.O. Box 56 | | | Street Address P.O. Box 56 | | |
| City Newton | State MA | Zip 02464 | City Newton | State MA | Zip 02464 |
| 8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/> | | | | | |
| Director Name Kenneth C. Wilson | | | Director Name Ronald E. Lustig | | |
| Street Address P.O. Box 56 | | | Street Address P.O. Box 56 | | |
| City Newton | State MA | Zip 02464 | City Newton | State MA | Zip 02464 |
| Director Name | | | Director Name | | |
| Street Address | | | Street Address | | |
| City | State | Zip | City | State | Zip |
| 9. Shares Authorized This information is currently of record in the Department of State. Changes require an additional filing. | | 10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/> | | | |
| | | NUMBER OF SHARES | | CLASS/SERIES | PAR VALUE |
| | | 982 | | n/a | \$ 0.00 |
| | | | | | |
| 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 Ronald E. Lustig, Secretary | | | | Date March 10, 2020 | |
| Signature of Authorized Representative <i>[Signature]</i> Secretary | | | | FILED | |
| SIGN DOCUMENT HERE | | | | MAR 10 2020 | |

 BY *[Signature]* **T8D4H** **11:49:50**