



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

FILED

JAN 27 2021

STAMP

Annual Report for the year: **2021**
 Corporation

BY *[Signature]* FOR

- 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 000105750		2. Exact name of the Corporation Law Offices of Joseph T. Nottie, III, Inc.			
3. Principal Office Address 77 Rolfe Square			City Cranston	State RI	Zip 02910
4. NAICS Code 541110		6. Brief description of the character of business conducted in Rhode Island To provide legal services.			
5. State of Incorporation RI					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Joseph T. Nottie, III			Vice-President Name		
Street Address 77 Rolfe Square			Street Address		
City Cranston	State RI	Zip 02910	City	State	Zip
Secretary Name			Treasurer Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
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 <input type="checkbox"/>		
This information is currently of record in the Department of State. Changes require an additional filing.			NUMBER OF SHARES		CLASS/SERIES
			100		PAR VALUE
			Common Stock		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 Joseph T. Nottie, III					Date 1/20/2021
Signature of Authorized Representative <i>[Signature]</i>					SIGN DOCUMENT HERE

MAIL TO:
 Division of Business Services
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