



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.

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BUSINESS DIV
2021 MAR - 1 PM 2:43

1. Entity ID Number <u>160433</u>		2. Exact name of the Corporation <u>HYI, Inc.</u>	
3. Principal Office Address <u>38 ELM ST.</u>		City <u>NEW BEDFORD</u>	State <u>MA</u>
		Zip <u>02740</u>	
4. NAICS Code <u>336612</u>	6. Brief description of the character of business conducted in Rhode Island <u>DORMANT COMPANY</u>		
5. State of Incorporation <u>RI</u>			
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
President Name <u>WINN WILLARD</u>		Vice-President Name <u>WINN WILLARD</u>	
Street Address <u>38 ELM ST.</u>		Street Address <u>38 ELM ST</u>	
City <u>NEW BEDFORD</u>	State <u>MA</u>	City <u>NEW BEDFORD</u>	State <u>MA</u>
Zip <u>02740</u>		Zip <u>02740</u>	
Secretary Name <u>JOHN H. DEKNATEL</u>		Treasurer Name <u>WINN WILLARD</u>	
Street Address <u>38 ELM ST</u>		Street Address <u>38 ELM ST.</u>	
City <u>NEW BEDFORD</u>	State <u>MA</u>	City <u>NEW BEDFORD</u>	State <u>MA</u>
Zip <u>02740</u>		Zip <u>02740</u>	
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
Director Name <u>PETER J. VAN LAKKER</u>		Director Name <u>JOHN H. DEKNATEL</u>	
Street Address <u>38 ELM ST.</u>		Street Address <u>38 ELM ST</u>	
City <u>NEW BEDFORD</u>	State <u>MA</u>	City <u>NEW BEDFORD</u>	State <u>MA</u>
Zip <u>02740</u>		Zip <u>02740</u>	
Director Name <u>CHARLES R. HUNT</u>		Director Name <u>WINN WILLARD</u>	
Street Address <u>38 ELM ST</u>		Street Address <u>38 ELM ST</u>	
City <u>NEW BEDFORD</u>	State <u>MA</u>	City <u>NEW BEDFORD</u>	State <u>MA</u>
Zip <u>02740</u>		Zip <u>02740</u>	
9. Shares Authorized <u>200,000.00</u>		10. Shares Issued <u>0</u> Check the box to indicate an attachment <input type="checkbox"/>	
This information is currently of record in the Department of State. <u>200,000.00</u>		NUMBER OF SHARES <u>0</u>	CLASS/SERIES <u>CWP</u>
Changes require an additional filing.		PAR VALUE <u>\$0.0100</u>	
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. <u>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.</u>			
Name of Authorized Representative <u>WINN WILLARD</u>		Date <u>2/25/2021</u>	
Signature of Authorized Representative <u>[Signature]</u>			