State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2021

Corporation

→ Filing period: January 1 - March 1
→ Filing Fee: $50.00
→ Penalty: Additional $25.00 fee if form is not filed by April 1.

MAR 03 2021

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1. Entity ID Number	2. Exact name of the Corporation
000090887	Billings Research Group, Inc.

3. Principal Office Address	City	State	Zip
47 Wianno Road	Bourne	MA	02532

4. NAICS Code	6. Brief description of the character of business conducted in Rhode Island
541690	To provide consulting services in the composite industry
5. State of Incorporation	
Rhode Island	

7. List ALL officers (names and addresses) — Check the box to indicate an attachment ☐

President Name	Vice-President Name
Jonathan Billings	
Street Address: 47 Wianno Road	Street Address:
City: Bourne; State: MA; Zip: 02532	City: ; State: ; Zip:
Secretary Name: Steven M. McInnis	Treasurer Name: Jonathan Billings
Street Address: Admiral's Gate Tower, 221 Third St., Suite 510	Street Address: 47 Wianno Road
City: Newport; State: RI; Zip: 02840	City: Bourne; State: MA; Zip: 02532

8. List ALL directors (names and addresses) — Check the box to indicate an attachment ☐

Director Name	Director Name
Jonathan Billings	
Street Address: 47 Wianno Road	Street Address:
City: Bourne; State: MA; Zip: 02532	City: ; State: ; Zip:
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 ☐

NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
100	Common	$.01 Par

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	Date
Jonathan Billings	2-8-21

Signature of Authorized Representative

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov