State of Rhode Island
Department of State - Business Services Division

RECEIVED
R.I. DEPT. OF STATE
BUS SVCS DIV
2021 MAR 12 PM 1:46

Annual Report for the year: 2020
Limited Liability Company

→ Filing period: September 1 - November 1
→ Filing Fee: $50.00
→ Penalty: Additional $25.00 fee if form is not filed by December 1.

1. Entity ID Number	2. Exact name of the Limited Liability Company		
000091967	**Collins, Cronin & Corcoran, LLC**		
3. NAICS Code 531120	4. Brief description of the character of business conducted in Rhode Island Lessor of nonresidential real estate		
5. State of Formation Ma			
6. Principal Office Address 922 Flaherty Drive	City New Bedford	State MA	Zip 02745

7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name Kevin J. Jones	Contact Title Manager		
Street Address 922 Flaherty Drive	City New Bedford	State MA	Zip 02745

8. List **ALL** managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - **DO NOT LIST MEMBERS**					
Manager Name Kevin J Jones			Manager Name J. Thomas Jones		
Street Address 35 Macy Street			Street Address 18 Upland Way		
City Raynham	State MA	Zip 02767	City Mattapoisett	State MA	Zip 02739
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip

Check the box to indicate an attachment ☐

9. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.

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 Person	Date
Kevin J. Jones	3/9/21

Signature of Authorized Person
Kevin J. Jones

1:46
FILED
MAR 12 2021
BY BXD68

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

FORM 632 - Revised: 08/2020