



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.

 RI DEPT. OF STATE  
 BUS. SVCS. DIV.  
 2021 MAR 23 PM 3:41

1. Entity ID Number <b>000002545</b>		2. Exact name of the Corporation <b>Blount Communications, Inc.</b>	
3. Principal Office Address <b>19 Luther Ave</b>		City <b>Warwick</b>	State <b>RI</b>
4. NAICS Code <b>515112</b>		6. Brief description of the character of business conducted in Rhode Island <b>Radio Broadcasting</b>	
5. State of Incorporation <b>RI</b>			
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>			
President Name <b>William A. Blount</b>		Vice-President Name <b>Deborah C. Blount</b>	
Street Address <b>109 Varney Road</b>		Street Address <b>109 Varney Road</b>	
City <b>Gilmanston Iron Works</b>	State <b>NH</b>	Zip <b>03837</b>	City <b>Gilmanston Iron Works</b>
Secretary Name <b>Deborah C. Blount</b>		Treasurer Name <b>William A. Blount</b>	
Street Address <b>109 Varney Road</b>		Street Address <b>109 Varney Road</b>	
City <b>Gilmanston Iron Works</b>	State <b>NH</b>	Zip <b>03837</b>	City <b>Gilmanston Iron Works</b>
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>			
Director Name <b>William A. Blount</b>		Director Name <b>Deborah C. Blount</b>	
Street Address <b>109 Varney Road</b>		Street Address <b>109 Varney Road</b>	
City <b>Gilmanston Iron Works</b>	State <b>NH</b>	Zip <b>03837</b>	City <b>Gilmanston Iron Works</b>
Director Name		Director Name	
Street Address		Street Address	
City	State	Zip	City
9. Shares Authorized		10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>	
This information is currently of record in the Department of State.  Changes require an additional filing.		NUMBER OF SHARES	
		CLASS/SERIES	
		PAR VALUE	
		<b>100</b>	
		<b>CNP</b>	
		<b>0</b>	
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. <b>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.</b>			
Name of Authorized Representative <b>William A. Blount</b>		Date <b>3/8/2021</b>	
Signature of Authorized Representative 			

FILED

 MAR 23 2021  
 BY **303XV**  
 AA **3:43 PM**