



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.

FILED
APR 12 2021
5007
02

1. Entity ID Number 141484		2. Exact name of the Corporation HURLEY CONSTRUCTION, INC				
3. Principal Office Address 30 DAVIDS WAY			City WAKEFIELD	State RI	Zip 02879	
4. NAICS Code 236118		6. Brief description of the character of business conducted in Rhode Island COMMERCIAL AND INDUSTRIAL AND RESIDENTIAL CONSTRUCTION				
5. State of Incorporation RHODE ISLAND						
7. List ALL officers (names and addresses)					Check the box to indicate an attachment <input type="checkbox"/>	
President Name TIMOTHY P. HURLEY			Vice-President Name CHRISTOPHER HURLEY			
Street Address 30 DAVIDS WAY			Street Address 30 DAVIDS WAY			
City WAKEFIELD	State RI	Zip 02879	City WAKEFIELD	State RI	Zip 02879	
Secretary Name TIMOTHY P HURLEY			Treasurer Name CHRISTOPHER HURLEY			
Street Address 30 DAVIDS WAY			Street Address 30 DAVIDS WAY			
City WAKEFIELD	State RI	Zip 02879	City WAKEFIELD	State RI	Zip 02879	
8. List ALL directors (names and addresses)					Check the box to indicate an attachment <input type="checkbox"/>	
Director Name TIOOTHY P. HURLEY			Director Name CHRISTOPHER HURLEY			
Street Address 30 DAVIDS WAY			Street Address 30 DAVIDS WAY			
City WAKEFIELD	State RI	Zip 02879	City WAKEFIELD	State RI	Zip 02879	
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	PAR VALUE	
		301		COMMON	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. <i>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.</i>						
Name of Authorized Representative TIMOTHY P. HURLEY				Date 2/3/21		
Signature of Authorized Representative 						

MAIL TO:
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Website: www.sos.ri.gov