



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: **2019**

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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R.I. DEPT. OF STATE
BUS SVCS DIV.

2021 JUL -1 A 9:58

1. Entity ID Number 001049036		2. Exact name of the Corporation Murphy & Associates, Inc.			
3. Principal Office Address 22 Unity Court			City Warwick	State RI	Zip 02889
4. NAICS Code 541213	6. Brief description of the character of business conducted in Rhode Island Management and Consulting Company.				
5. State of Incorporation Rhode Island					
7. List ALL officers (names and addresses)					Check the box to indicate an attachment ☐
President Name Richard Murphy			Vice-President Name		
Street Address 22 Unity Court			Street Address		
City Warwick	State RI	Zip 02889	City	State	Zip
Secretary Name Richard Murphy			Treasurer Name Richard Murphy		
Street Address 22 Unity Court			Street Address 22 Unity Court		
City Warwick	State RI	Zip 02889	City Warwick	State RI	Zip 02889
8. List ALL directors (names and addresses)					Check the box to indicate an attachment ☐
Director Name Richard Murphy			Director Name		
Street Address 22 Unity Court			Street Address		
City Warwick	State RI	Zip 02889	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized		10. Shares Issued			
This information is currently of record in the Department of State. Changes require an additional filing.		Check the box to indicate an attachment ☐			
		NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	
		1000	Common	0	
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 Richard Murphy				Date 06/30/2021	
Signature of Authorized Representative 				FILED	