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	2. Exact name of the Corporation
001049036	Murphy & Associates, Inc.

3. Principal Office Address	City	State	Zip
22 Unity Court	Warwick	RI	02889

4. NAICS Code	6. Brief description of the character of business conducted in Rhode Island
541213	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	Vice-President Name
Richard Murphy	
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	Director Name
Richard Murphy	
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 — Check the box to indicate an attachment ☐		
This information is currently of record in the Department of State.	NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
Changes require an additional filing.	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	Date
Richard Murphy	06/30/2021

Signature of Authorized Representative: Richard Murphy

FILED
JUL 01 2021
BY CH 564/BN
10:01

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 630 - Revised: 08/2020