



State of Rhode Island

Department of State - Business Services Division

FILED

JAN 21 2022

BY

[Handwritten signature]

Annual Report for the year: 2022
Corporation

- Filing period: February 1 - May 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by May 31.

1. Entity ID Number 000090873		2. Exact name of the Corporation J.R.G.- Controller, Inc.			
3. Principal Office Address 6 Westridge Court			City North Kingstown	State RI	Zip 02852
4. NAICS Code 541219		6. Brief description of the character of business conducted in Rhode Island TO ENGAGE IN THE BUSINESS OF PROVIDING MANAGEMENT CONSULTING SERVICES. TITLE: 7-1.1			
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 James R. Ganung			Vice-President Name		
Street Address 6 Westridge Court			Street Address		
City North Kingstown	State RI	Zip 02852	City	State	Zip
Secretary Name James R. Ganung			Treasurer Name James R. Ganung		
Street Address 6 Westridge Court			Street Address 6 Westridge Court		
City North Kingstown	State RI	Zip 02852	City North Kingstown	State RI	Zip 02852
8. List ALL directors (names and addresses)					Check the box to indicate an attachment <input type="checkbox"/>
Director Name James R. Ganung			Director Name		
Street Address 6 Westridge Court			Street Address		
City North Kingstown	State RI	Zip 02852	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 <input type="checkbox"/>	
This information is currently of record in the Department of State. Changes require an additional filing.		NUMBER OF SHARES		C..ASS/SERIES	
		2,000		\$0.00	
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 James R. Ganung, President				Date 01/19/2022	
Signature of Authorized Representative <i>James R Ganung</i>					

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