RI SOS Filing Number: 202212847570 Date: 3/7/2022 4:00:00 PM

State of Rhode Island Department of S	itate - Busino	ess Services I	Division				
Annual Report for the year: 2022				jii 199 3 ili P			
Corporation 2022			<u>-</u>				
 → Filing period: February 1 - May 1 → Filing Fee: \$50.00 → Penalty: Additional \$25.00 fee if form is not filed by May 31. 			MAR 0 7 2022				
1. Entity ID Number	2. Exact nam	e of the Corporation	 n		Y		
83720		Eddy Building Company					
3. Principal Office Address			City State Zip				
P.O. Box 1039			Little Con	Little Compton		02837	
4. NAICS Code	6. Brief descr	Brief description of the character of business conducted in Rhode Island					
236115	Engage i	Engage in the business of building construction and renovations.					
5. State of Incorporation							
Rhode Island	1						
7. List ALL officers (names and a	addresses)		·		ck the box to in	dicate an attachment	
President Name Bruce E. Eddy			Vice-President Name None.				
Street Address P.O. Box 1039			Street Address				
City Little Compton	State RI	^{Zip} 02837	City		State	Zip	
Secretary Name Bruce E. Eddy			Treasurer Name Bruce E. Eddy				
Street Address P.O. Box 1039			Street Address P.O. Box 1039				
^{City} Little Compton	State RI	^{Zip} 02837	City Little Compton		State RI	^{Zlp} 02837	
List ALL directors (names and Director Name	addresses)		I Dispose a Name		eck the box to in	ndicate an attachment 🔲	
None.			Director Name				
Street Address			Street Address				
City	State	Zip	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. Changes require an additional filing.		NUMBER O	F SHARES			\$1.00 par value	
		100	100		Common \$1.		
11. This report must be executed	d on hehalf of the	compration by an	authorized conco	entatus If the se	monation in to 4	he hands of a manumer or	
trustee, this report must be exec	cuted on behalf of	the corporation by	the receiver or to	ustee.			
Under penalty of perjury, I dec statements, and that all states	clare and affirm t ments contained	hat i have examin herein are true ar	ed this report, is nd correct.	ncluding any acc	companying so	chedules and	
Name of Authorized Representa					Date		
Bruce E. Eddy, Preside		1-24-82					
Signature of Authorized Represe	entative						
8.81							

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 530 - Rovised: 11/2021