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State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2023

Corporation

→ Filing period: February 1 - May 1 → Filing Fee: \$50.00

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3)(6802

→ Penalty: Additional \$25 Entity ID Number 										
000040363		2. Exact name of the Corporation Gil Parking Corporation								
3. Principal Office Address	City		State	Zip						
180 Inman Avenue	Warwick		RI	02886						
4. NAICS Code	6. Brief desci	6. Brief description of the character of business conducted in Rhode Island								
812930	Parking L	Parking Lot								
5. State of Incorporation										
Rhode Island		1								
7. List ALL officers (names ar	nd addresses)			Check	the box to in	ndicate an attachment				
President Name James F D	Vice-President Name									
Street Address 180 Inman	Street Address									
^{City} Warwick	State RI	^{Zip} 02886	City		State	Zıp				
Secretary Name			Treasurer Na	Vame						
Street Address	Street Address									
City	State	Zıp	City		State	Zip				
8. List ALL directors (names a	and addresses)		Check the box to indicate an attachment							
Director Name James F Du	Director Name									
Street Address 180 Inman	Street Address									
^{City} Warwick	State RI	^{Zip} 02886	City		State	.7ip				
Director Name		•	Director Name							
Street Adoress	Street Address									
City	State	Zip	City		State	Zip				
					Joine	L.P				
9. Shares Authorized	9. Shares Authorized 10			Shares Issued Check the box to indicate NUMBER OF SHARES CLASS/SERIES						
This information is currently of record in the Department of State. Changes require an additional filing.		100	SHARES	CLASS/SERIES Common		1.00				
					· · ·					
11. This report must be execu					oration is in t	I the hands of a receiver or				
trustee, this report must be ex Under penalty of perjury, I de	xecuted on behalf of	the corporation by t	he receiver or t	rustee.		ahadulaa aad				
statements, and that all sta	tements contained	herein are true an	d correct.	muluumg any accol	npanying Si	unequies and				
Name of Authorized Represe	ntative				Date	<u> </u>				
James E Dugan					\perp //	28/2023				
Signature of Authorized Repr	elentative			· · · · · ·	/					

MAIL TO: Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov