



State of Rhode Island

Department of State - Business Services Division

FILED

Annual Report for the year: 2023

FEB 09 2023

Corporation

BY 3472

→ 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 842490		2. Exact name of the Corporation Linehan Custom Homes, Inc	
3. Principal Office Address 12 Castle Hill Road		City Pawcatuck	State CT
		Zip 06379	
4. NAICS Code 23	6. Brief description of the character of business conducted in Rhode Island Home building and renovation		
5. State of Incorporation CT			
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
President Name Karen O Linehan		Vice-President Name	
Street Address 12 Castle Hill Rd		Street Address	
City Pawcatuck	State CT	Zip 06379	
Secretary Name Paul F Linehan		Treasurer Name Karen O Linehan	
Street Address 12 Castle Hill Rd		Street Address 12 Castle Hill Rd	
City Pawcatuck	State CT	Zip 06379	
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
Director Name NONE		Director Name	
Street Address		Street Address	
City	State	Zip	
Director Name		Director Name	
Street Address		Street Address	
City	State	Zip	
9. Shares Authorized Check the box to indicate an attachment <input type="checkbox"/>			
This information is currently of record in the Department of State.		10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>	
Changes require an additional filing.		NUMER OF SHARES none	CLASS/SERIES none
		PAR VALUE no par value	
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 Paul F Linehan		Date 2/5/23	
Signature of Authorized Representative <i>Paul F. Linehan</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