



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

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

FILED

MAR 14 2023

BY

| | | | | | |
|---|-------------|--|---|--------------------|--------------|
| 1. Entity ID Number 000107650 | | 2. Exact name of the Corporation Drumcoll Investments, Inc | | | |
| 3. Principal Office Address 34 Sweet Hill Drive | | | City Johnston | State RI | Zip 02919 |
| 4. NAICS Code 541990 | | 6. Brief description of the character of business conducted in Rhode Island Investments | | | |
| 5. State of Incorporation RI | | | | | |
| 7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/> | | | | | |
| President Name Raymond F Bruzzese | | | Vice-President Name Marilyn A. Solomon | | |
| Street Address 34 Sweet Hill Drive | | | Street Address 34 Sweet Hill Drive | | |
| City Johnston | State RI | Zip 02919 | City Johnston | State RI | Zip 02919 |
| Secretary Name Raymond F Bruzzese | | | Treasurer Name Raymond F. Bruzzese | | |
| Street Address 34 Sweet Hill Drive | | | Street Address 34 Sweet Hill Drive | | |
| City Johnston | State RI | Zip 02919 | City Johnston | State RI | Zip 02919 |
| 8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/> | | | | | |
| Director Name | | | 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 <input type="checkbox"/> | | |
| This information is currently of record in the Department of State. Changes require an additional filing. | | | NUMBER OF SHARES | | |
| | | | CLASS/SERIES | | |
| | | | PAR VALUE | | |
| | | | 100 | | |
| | | | Common | | |
| | | | No Par | | |
| 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 Raymond F Bruzzese | | | | Date 03/10/2023 | |
| Signature of Authorized Representative | | | | | |