



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 16 2023

BY

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DS

1. Entity ID Number 980690		2. Exact name of the Corporation F. J. SCOTT PAINTING, INC	
3. Principal Office Address 7 BLUE ACRES WAY		City WESTPORT	State MA
		Zip 02790	
4. NAICS Code 444120	6. Brief description of the character of business conducted in Rhode Island PAINTING BUSINESS.		
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 FRANK J. SCOTT		Vice-President Name KELLY SCOTT	
Street Address 7 BLUE ACRES WAY		Street Address 7 BLUE ACRES WAY	
City WESTPORT	State MA	City WESTPORT	State MA
Zip 02790		Zip 02790	
Secretary Name FRANK J. SCOTT		Treasurer Name FRANK J. SCOTT	
Street Address 7 BLUE ACRES WAY		Street Address 7 BLUE ACRES WAY	
City WESTPORT	State MA	City WESTPORT	State MA
Zip 02790		Zip 02790	
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	City	State
Zip		Zip	
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
9. Shares Authorized Check the box to indicate an attachment <input type="checkbox"/>			
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	
		100	COMMON
			\$0.0
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 FRANK J. SCOTT			Date 3/13/23
Signature of Authorized Representative 			

MAIL TO:
Division of Business Services
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Website: www.sos.ri.gov