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State of Rhode Island Office of the Secretary of State

No Fee

Division Of Business Services 148 W. River Street Providence RI 02904-2615 (401) 222-3040

Business Corporation
Annual Report - Amended

Filing Period: February 1 - May 1

In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

This form is only to be used to amend the current annual report on file with this office.

ANNUAL REPORT YEAR: 2024

- 1. Corporate ID No. 000008942
- 2. Name of Corporation McKAY'S FURNITURE INC.
- 3. Street Address Principal Business Office:

No. and Street: <u>182 LAYFAYETTE ROAD</u>

City or Town: NORTH KINGSTOWN State: RI Zip: 02852 Country: USA

4. Business Phone No.

(401) 295-1915

5. State of Incorporation

State: RI

NAICS CODE

Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.

449110

6. Brief Description of the Character of Business Conducted in Rhode Island

RETAIL SALE OF FURNITURE AND CARPETING

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country	
TREASURER	SCOTT C MCKAY	52 POPLAR AVENUE NORTH KINGSTOWN, RI 02852 USA	
SECRETARY	SCOTT C MCKAY	52 POPLAR AVENUE NORTH KINGSTOWN, RI 02852 USA	
PRESIDENT	KEITH G MCKAY	277 BOSTON NECK ROAD NORTH KINGSTOWN, RI 02852 USA	
VICE PRESIDENT	KERRY P MCKAY	747 SHERMANTOWN ROAD SAUNDERSTOWN, RI 02874 USA	
DIRECTOR	KEITH G MCKAY	227 BOSTON NECK ROAD NORTH KINGSTOWN, RI 02852 USA	
DIRECTOR	KERRY P MCKAY	747 SHERMANTOWN ROAD SAUNDERSTOWN, RI 02852 USA	
DIRECTOR	SCOTT C MCKAY	52 POPLAR AVENUE NORTH KINGSTOWN, RI 02852 USA	

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares Number of Shares	Total Issued and Outstanding Num of Shares
CNP		\$0.0000	500.00	100

9. 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.

Signed this 4 Day of January, 2024 at 12:05:48 PM. This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.

By SCOTT MCKAY

Signature of Authorized Representative of the Corporation

Form No. 630 Revised 09/07

All Rights Reserve	i		

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I, GREGG M. AMORE, Secretary of State of the State of Rhode Island,
hereby certify that this document, duly executed in accordance with the provisions
of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this
office on this day:

January 04, 2024 12:05 PM

Gregg M. Amore
Secretary of State

Tregs M. Coure

