	State of Rhode Island For Office of the Secretary of State	ee: \$50.00					
	Division Of Business Services						
	148 W. River Street						
1636	Providence RI 02904-2615 (401) 222-3040						
Business Corporat							
Annual Report Filing Period: February							
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.							
ANNUAL REPORT YEAR - ENTER THE CURRENT YEAR 2024 : <u>2024</u>							
1. Corporate ID No.	000010711						
2. Name of Corporation Peter Gibbons Inc.							
3. Street Address Principal Business Office:							
No. and Street:	<u>PO BOX 1855</u>						
	544 CENTER RD						
City or Town:	BLOCK ISLAND State: <u>RI</u> Zip: <u>02807</u> Country: <u>US</u>	<u>A</u>					
4. Business Phone N	lo.						
<u>4015781125</u>							
5. State of Incorporat	tion						
State: <u>RI</u>							
	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.							
<u>999999</u>							
6. Brief Description of the Character of Business Conducted in Rhode Island							
ART							
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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete.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
PRESIDENT	PETER W GIBBONS	544 CENTER ROAD BLOCK ISLAND, RI 02807 USA
TREASURER	PETER W GIBBONS	PO BOX 1855 BLOCK ISLAND, RI 02807 US
SECRETARY	PETER W GIBBONS	PO BOX 1855 BLOCK ISLAND, RI 02807 US
VICE PRESIDENT	SUSAN T GIBBONS	PO BOX 1855 BLOCK ISLAND, RI 02807 US
OTHER OFFICER	PETER W GIBBONS	PO BOX 1855, 544 CENTER RD BLOCK ISLAND, RI 02807 UNI

8. Shares Authorized and Issued

				Total Issued
Class of Stock	Series of Stock	Par Value Per		and
		Share	Total Authorized	Outstanding
			Shares	Num of
			Number of Shares	Shares
CNP		\$0.0000	600.00	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 26 Day of January, 2024 at 10:35:02 AM. *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 PETER W GIBBONS

Signature of Authorized Representative of the Corporation

Form No. 630 Revised 09/07

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