



State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2024
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
JAN 30 2024
BY 6522
[Signature]

1. Entity ID Number 123886		2. Exact name of the Corporation WILLETT AVENUE DONUTS, INC.			
3. Principal Office Address 925 Willett Avenue		City East Providence		State RI	Zip 02915-000
4. NAICS Code 722513		6. Brief description of the character of business conducted in Rhode Island operation of a donut shop			
5. State of Incorporation RI					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Erica Placido-Coelho			Vice-President Name Lena Placido		
Street Address 12 Leila Jean Drive			Street Address 12 Leila Jean Drive		
City Bristol	State RI	Zip 02809-	City Bristol	State RI	Zip 02809-
Secretary Name Erica Placido-Coelho			Treasurer Name Denise Nicolace		
Street Address 12 Leila Jean Drive			Street Address 14 Pine Acres Drive		
City Bristol	State RI	Zip 02809-	City Bellingham	State MA	Zip 02019-
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name Erica Placido-Coelho			Director Name Lena Placido		
Street Address 12 Leila Jean Drive			Street Address 12 Leila Jean Drive		
City Bristol	State RI	Zip 02809-	City Bristol	State RI	Zip 02809-
Director Name Denise Nicolace			Director Name none		
Street Address 14 Pine Acres Drive			Street Address none		
City Bellingham	State MA	Zip 02019-	City none	State none	Zip none
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
		104		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 Erica Placido-Coelho <i>[Signature]</i>				Date January 2, 2024	
Signature of Authorized Representative <i>[Signature]</i>					

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