



State of Rhode Island
Department of State - Business Services Division

FILED

FEB 05 2024

BY: *[Signature]*

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.

1. Entity ID Number 000112356		2. Exact name of the Corporation Irons Gate Stable, Inc.			
3. Principal Office Address 40 Rockwood Lane			City Wakefield	State RI	Zip 02879
4. NAICS Code 115210		6. Brief description of the character of business conducted in Rhode Island To operate an equestrian teaching, judging and training business			
5. State of Incorporation RI					
7. List ALL officers (names and addresses)					Check the box to indicate an attachment <input type="checkbox"/>
President Name Amy Eidson			Vice-President Name		
Street Address 40 Rockwood Lane			Street Address		
City Wakefield	State RI	Zip 02879	City	State	Zip
Secretary Name Amy Eidson			Treasurer Name Amy Eidson		
Street Address 40 Rockwood Lane			Street Address 40 Rockwood Lane		
City Wakefield	State RI	Zip 02879	City Wakefield	State RI	Zip 02879
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			
This information is currently of record in the Department of State. Changes require an additional filing.		NUMBER OF SHARES		CLASS/SERIES	PAR VALUE
		100	CPN	0.0000	
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 Amy Eidson					Date 2/1/2024
Signature of Authorized Representative <i>Amy Eidson</i>					

MAIL TO:
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