



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

FEB 05 2024

E: 10888

1 Entity ID Number 138244		2 Exact name of the Corporation LEGACY GENERAL CONTRACTING, INC.									
3 Principal Office Address 551 Warren Avenue		City East Providence		State RI	Zip 02914						
4 NAICS Code 238990	6 Brief description of the character of business conducted in Rhode Island To operate a real estate management and contracting 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 Mario J. Lagoa		Vice-President Name Eli J. Costa									
Street Address 551 Warren Avenue		Street Address 551 Warren Avenue									
City East Providence	State RI	Zip 02914	City East Providence	State RI	Zip 02914						
Secretary Name Paul J. Lopes		Treasurer Name Paul J. Lopes									
Street Address 551 Warren Avenue		Street Address 551 Warren Avenue									
City East Providence	State RI	Zip 02914	City East Providence	State RI	Zip 02914						
8 List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>											
Director Name None.		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 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.		<table border="1"> <thead> <tr> <th>NUMBER OF SHARES</th> <th>CLASS/SERIES</th> <th>PAR VALUE</th> </tr> </thead> <tbody> <tr> <td>100</td> <td>Common</td> <td>No Par Value</td> </tr> </tbody> </table>				NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	100	Common	No Par Value
		NUMBER OF SHARES	CLASS/SERIES	PAR VALUE							
100	Common	No Par Value									
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. <i>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.</i>											
Name of Authorized Representative Mario J. Lagoa, President				Date 1/25/2024							
Signature of Authorized Representative											

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040

Website: www.sos.ri.gov

FORM 630 - Revised: 11/2021