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**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.

1. Entity ID Number 140612	2. Exact name of the Corporation Jamie Moore Appraisal Services, Inc.
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3. Principal Office Address 1202 Capella South	City Newport	State RI	Zip 02840
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4. NAICS Code 531320	6. Brief description of the character of business conducted in Rhode Island Real Property Appraisal Services
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 Jamie D. Moore			Vice-President Name Brian M. Moore		
Street Address P.O. Box 667			Street Address P.O. Box 667		
City Newport	State RI	Zip 02840	City Newport	State RI	Zip 02840
Secretary Name			Treasurer Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip

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 Check the box to indicate an attachment <input type="checkbox"/>	
This information is currently of record in the Department of State.	NUMBER OF SHARES	CLASS-SERIES
Changes require an additional filing.	0	0

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 Jamie D. Moore	Date 02/25/2024
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Signature of Authorized Representative
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FILED

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

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