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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	2. Exact name of the Corporation
795416	B. Brown Construction Inc.

3. Principal Office Address	City	State	Zip
270 Burnt Hill Road	Scituate	RI	02831

4. NAICS Code	6. Brief description of the character of business conducted in Rhode Island
237990	Excavation/site work/real estate development
5. State of Incorporation: Rhode Island	

7. List ALL officers (names and addresses) — Check the box to indicate an attachment ☐

President Name	Vice-President Name
Brian P. Brown	Lori A. Brown
Street Address: 270 Burnt Hill Road	Street Address: 270 Burnt Hill Road
City: Scituate, State: RI, Zip: 02831	City: Scituate, State: RI, Zip: 02831
Secretary Name: Lori A. Brown	**Treasurer Name:** Brian P. Brown
Street Address: 270 Burnt Hill Road	Street Address: 270 Burnt Hill Road
City: Scituate, State: RI, Zip: 02831	City: Scituate, State: RI, Zip: 02831

8. List ALL directors (names and addresses) — Check the box to indicate an attachment ☐

Director Name	Director Name
Brian P. Brown	Lori A. Brown
Street Address: 270 Burnt Hill Road	Street Address: 270 Burnt Hill Road
City: Scituate, State: RI, Zip: 02831	City: Scituate, State: RI, Zip: 02831
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 ☐		
This information is currently of record in the Department of State. **Changes require an additional filing.**	NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
	600	common	None

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	Date
Brian P. Brown, President	2-15-24

Signature of Authorized Representative: Brian P. Brown

FILED

MAR 05 2024

BY RZQ NQ

@ 12:51

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 12-2023