



State of Rhode Island
Department of State - Business Services Division

FILED

Annual Report for the year: 2024

MAR 18 2024

Corporation

BY 1518

→ 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 <u>2934</u>		2. Exact name of the Corporation <u>BROOK ROCK Company, Ltd.</u>			
3. Principal Office Address <u>2625 C Comdr. Perry Highway</u>		City <u>Wakefield</u>		State <u>R.I.</u>	Zip <u>02879</u>
4. NAICS Code <u>531110</u>		6. Brief description of the character of business conducted in Rhode Island <u>Rental Real Estate</u>			
5. State of Incorporation <u>Rhode Island</u>					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name <u>Alice M. Freed</u>			Vice-President Name <u>Christopher J. Freed</u>		
Street Address <u>2625 C Comdr. Perry Highway</u>			Street Address <u>2625 C Comdr. Perry Highway</u>		
City <u>Wakefield</u>	State <u>R.I.</u>	Zip <u>02879</u>	City <u>Wakefield</u>	State <u>R.I.</u>	Zip <u>02879</u>
Secretary Name <u>Christopher J. Freed</u>			Treasurer Name <u>Alice M. Freed</u>		
Street Address <u>2625 C. Comdr. Perry Highway</u>			Street Address <u>2625 C Comdr. Perry Highway</u>		
City <u>Wakefield</u>	State <u>R.I.</u>	Zip <u>02879</u>	City <u>Wakefield</u>	State <u>R.I.</u>	Zip <u>02879</u>
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name <u>Alice M. Freed</u>			Director Name <u>Christopher J. Freed</u>		
Street Address <u>2625 C Comdr. Perry Highway</u>			Street Address <u>2625 C Comdr. Perry Highway</u>		
City <u>Wakefield</u>	State <u>R.I.</u>	Zip <u>02879</u>	City <u>Wakefield</u>	State <u>R.I.</u>	Zip <u>02879</u>
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. <u>600 Common no par value</u>			NUMBER OF SHARES <u>400</u>		
Changes require an additional filing.			CLASS/SERIES <u>Common</u>		
			PAR VALUE <u>no par</u>		
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 <u>Alice M. Freed</u>					Date <u>March 14, 2024</u>
Signature of Authorized Representative <u>Alice M. Freed</u>					

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040

Website: www.sos.ri.gov