

State of Rhode Island Department of State - Business Services Division

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Annual Report for the year: 2024 Corporation	APR 0 8 2024	5
→ Filing period: February 1 - May 1 → Filing Fee: \$50.00	157	

Penalty, Additional \$25.00 Entity ID Number		ne of the Corporation	-					
1670153		David W. Bradley Plumbing and Heating, Inc.						
3. Principal Office Address 186 Burgess Avenue			City East P	Providence	State RI	Zip 02914		
4. NAICS Code 238220 5. State of Incorporation		6. Brief description of the character of business conducted in Rhode Island Plumbing and heating repairs						
Rhode Island			_					
7. List ALL officers (names and addresses) President Name David W. Bradley				Check the box to indicate an attachment ☐ Vice-President Name David W. Bradley				
Street Address 186 Burgess A	Avenue		Street Add	186 Burges:	s Avenue			
City East Providence	State RI	^{Zip} 02914	City Eas	East Providence		Zip 02914		
Secretary Name David W. Bra	dley	T			d W. Bradley			
Street Address 186 Burgess A	Avenue			Street Address 186 Burgess Avenue				
City East Providence	State RI	^{Z_{ip}} 02914	City Eas	City East Providence		Ι ^{Ζω} 02914		
8. List ALL directors (names and a	addresses)			Check th	e box to indica	ate an attachment		
Director Name			Director Na					
Street Address		Street Add	Street Address					
City	State	Zıp	City		State	Zip		
Director Name			Director Na	ame	1			
Street Address			Street Add	Street Address				
City	State	Zip	City		State	Zip		
9. Shares Authorized		10. Shares Issu	ued	Check th	I ne box to indica	ate an attachment		
This information is currently of rec	ord in the	NUMBER OF		CLASS/SE	ERIES T	PAR VALUE		
Department of State. Changes require an additional filing	1000		_	Common		No Par Value		
Changes require an additional immy	3 .							
11. This report must be executed ceiver or trustee, this report must					orporation is in	the hands of a re-		
Under penalty of perjury, I declar statements, and that all statements	lare and affirm t	that I have examine	d this repor		companying s	schedules and		
Name of Authorized Representati		7/	<u>/ / / / / / / / / / / / / / / / / / / </u>		Date	•		
David W. Bradley, Presid		no of	/		4-	4-34		
Signature of Authorized Represer	itative							

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov