State of Rhode Island

Department of State - Business Services Division

Annual Report for the year
Corporation 2024

→ Filing period: February 1 - May 1
→ Filing Fee: $50.00
→ Penalty: Additional $25.00 fee if form is not filed by May 31.

FILED
APR 17 2024
BY

1. Entity ID Number	2. Exact name of the Corporation
001663048	Driscoll Construction, Inc.

3. Principal Office Address	City	State	Zip
1829 Pawtucket Avenue	East Providence	RI	02914

4. NAICS Code	6. Brief description of the character of business conducted in Rhode Island
236118	General Contracting
5. State of Incorporation	
Rhode Island	

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

President Name	Street Address	City	State	Zip
Peter Driscoll	1829 Pawtucket Avenue	East Providence	RI	02914

Vice-President Name	Street Address	City	State	Zip
Peter Driscoll	1829 Pawtucket Avenue	East Providence	RI	02914

Secretary Name	Street Address	City	State	Zip
Peter Driscoll	1829 Pawtucket Avenue	East Providence	RI	02914

Treasurer Name	Street Address	City	State	Zip
Peter Driscoll	1829 Pawtucket Avenue	East Providence	RI	02914

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

Director Name	Street Address	City	State	Zip
Peter Driscoll	1829 Pawtucket Avenue	East Providence	RI	02914

9. Shares Authorized

This information is currently of record in the Department of State.

Changes require an additional filing.

10. Shares Issued — Check the box to indicate an attachment ☐

NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
1000		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	Date
Michael A. Devane, Esq.	4-15-24

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: 11-20