

State of Rhode Island

Department of State - Business Services Division

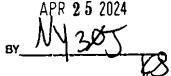
Annual Report for the year: 2024 Corporation

→ Filing period: February 1 - May 1 → Filing Fee: \$50.00 → Penalty: Additional \$25.00 fee if form is not filed by May 31.						55 S	
000130396	2. Exact name of the Corporation G.H. Electrical Service Co., Inc.						
3. Principal Office Address 781 Park Street			City Attleb	oro	State MA	Zip 02703	
4. NAICS Code 238210 5. State of Incorporation MA	6. Brief description of the character of business conducted in Rhode Island Electrical contractor, to perform the installation of new electrical work and/or make electrical repairs to existing electrical.						
7. List ALL officers (names and ad	dresses)			Chec	k the box to indicate	an attachment	
President Name Michael J Beaton				Vice-President Name Alexander S Beaton			
Street Address 66 West Hodges St				Street Address 14 Joanna Drive			
^{City} Norton	State MA	^{Zip} 02766	City Foxboro		State MA	Σ _{ιρ} 02035	
Secretary Name			Treasurer Name Christopher M Camara				
Street Address				Street Address 23 Kathleen Court			
City	State	Zıp	City Seekonk		State MA	^{Zio} 2771	
8. List ALL directors (names and a	ddresses)		 -	Chec	k the box to indicate		
Director Name			Director N	ame			
Street Address			Street Add	ress			
City	State	Zip	City		State	Zip	
Director Name	<u> </u>	 L	Director Na	ame		<u></u>	
Street Address				Street Address			
City	State	Zıp	City		State	Zip	
9. Shares Authorized	_ 	10. Shares Issu	ed .	Chen	k the box to indicate	an attachment 🗆	
			F SHARES CLASSISERIES PAR VALUE				
Changes require an additional filing.		2 600	2 600 CNP		0.0	0.00	
11. This count would be							
11. This report must be executed o	e executed on l	penait of the comora	tion by the r	receiver or tructor	n.		
onder penalty of perjury, I decial Statements, and that all statemen	'e and affirm ti nts contained i	hat i have examined	this moor	t, including any	accompanying sci	redules and	
Name of Authorized Representative Christopher M Camara				Date 04/05/2024		024	
Signature of Authorized Representa	FILED 224						
MAIL TO:	L TO:						

Division of Business Services

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

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



FORM 630- Revised: 12/2023