



State of Rhode Island  
Department of State - Business Services Division

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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 <b>000074740</b>		2. Exact name of the Corporation <b>226 South Main Street Title Holding Company</b>			
3. Principal Office Address <b>410 South Main Street</b>		City <b>Providence</b>	State <b>RI</b>	Zip <b>02903</b>	
4. NAICS Code <b>531120</b>	6. Brief description of the character of business conducted in Rhode Island <b>To hold title and deal with certain real estate located at 226 South Main Street, Providence, RI 02903.</b>				
5. State of Incorporation <b>Rhode Island</b>					
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name <b>Ronald Coia</b>		Vice-President Name <b>Vicki A. Virgilio</b>			
Street Address <b>47 Carriage Way</b>		Street Address <b>690 Pontiac Avenue</b>			
City <b>N. Providence</b>	State <b>RI</b>	Zip <b>02904</b>	City <b>Cranston</b>	State <b>RI</b>	Zip <b>02910</b>
Secretary Name <b>Vicki A. Virgilio</b>		Treasurer Name <b>Timothy Walsh</b>			
Street Address <b>690 Pontiac Avenue</b>		Street Address <b>20 Fieldstone Drive</b>			
City <b>Cranston</b>	State <b>RI</b>	Zip <b>02910</b>	City <b>Coventry</b>	State <b>RI</b>	Zip <b>0816</b>
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name <b>Ronald Coia</b>		Director Name <b>Vicki A. Virgilio</b>			
Street Address <b>47 Carriage Way</b>		Street Address <b>690 Pontiac Avenue</b>			
City <b>N. Providence</b>	State <b>RI</b>	Zip <b>02904</b>	City <b>Cranston</b>	State <b>RI</b>	Zip <b>02910</b>
Director Name <b>Timothy Walsh</b>		Director Name			
Street Address <b>20 Fieldstone Drive</b>		Street Address			
City <b>Coventry</b>	State <b>RI</b>	Zip <b>02816</b>	City	State	Zip
9. Shares Authorized		10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>			
This information is currently of record in the Department of State.  Changes require an additional filing.		NUMBER OF SHARES	CLASS/SERIS	PAR VALUE	
		None	CIV	0.0	
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.					
<b>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.</b>					
Name of Authorized Representative <b>Ronald R. Coia</b>		M3 FILED 938 <b>MAY 30 2024</b>		Date <b>5.29.24</b>	
Signature of Authorized Representative <i>Ronald R. Coia</i>		BY <b>CAWS</b>			

MAIL TO:  
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