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## State of Rhode Island Office of the Secretary of State

Fee: \$50.00

Division Of Business Services 148 W. River Street Providence RI 02904-2615 (401) 222-3040

# Foreign Business Corporation Annual Report

Filing Period: February 1 - May 1

In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR - ENTER THE CURRENT YEAR **2025**: <u>2025</u>

1. Corporate ID No. 000143091

2. Name of Corporation <u>TRAVELERS' TRANSIT, INC.</u>

3. Street Address Principal Business Office:

No. and Street: 106 GROVE ST

City or Town: MILLVILLE State: MA Zip: 01529 Country: USA

4. Business Phone No.

4017665900

5. State of Incorporation

State: MA

#### **NAICS CODE**

Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.

485310

6. Brief Description of the Character of Business Conducted in Rhode Island

TO PROVIDE CONTRACTED TRANSPORTATION SERVICES FOR SPECIAL-NEEDS STUDENTS AND

DEVELOPMENTALLY DISABLED ADULTS IN MASSACHUSETTS

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	KATHLEEN M. LEGARE	58 ORCHARD STREET BLACKSTONE , MA 01504 USA
TREASURER	WILLIAM R. LEGARE	106 GROVE STREET MILLVILLE, MA 01529 USA
SECRETARY	WILLIAM R. LEGARE	106 GROVE STREET MILLVILLE, MA 01529 USA
VICE PRESIDENT	MARJORIE E. BLANCHETTE	112 GROVE STREET MILLVILLE , MA 01529 USA
OTHER OFFICER	WILLIAM LEGARE	664 FRONT ST. WOONSOCKET, MA 01529 UNI

### 8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per		Total Issued and
		Share	Total Authorized	Outstanding
			Shares	Num of
			Number of Shares	Shares
CNP		\$0.0000	1,000.00	100

9. 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.

**Signed this 3 Day of February, 2025 at 12:20:34 PM.** This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.

### By WILLIAM LEGARE

Signature of Authorized Representative of the Corporation

Form No. 630 Revised 09/07

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