



State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2025

Corporation

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

FILED

FEB 03 2025

BY

1. Entity ID Number 000024312		2. Exact name of the Corporation DAVID LONDON & SONS, INC.												
3. Principal Office Address 25 CARRINGTON STREET			City LINCOLN	State RI	Zip 02865									
4. NAICS Code 423990		6. Brief description of the character of business conducted in Rhode Island SALES OF SHIPPING MATERIALS												
5. State of Incorporation RHODE ISLAND														
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>														
President Name JEROME LONDON			Vice-President Name DOROTHY LONDON											
Street Address 299 ALBION ROAD			Street Address 299 ALBION ROAD											
City LINCOLN	State RI	Zip 02865	City LINCOLN	State RI	Zip 02865									
Secretary Name JEROMRE LONDON			Treasurer Name EDWARD LONDON											
Street Address SEE ABOVE			Street Address 20 KIRKBRAE DRIVE											
City	State	Zip	City LINCOLN	State RI	Zip 02865									
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>														
Director Name JEROME LONDON			Director Name DOROTHY LONDON											
Street Address SEE ABOVE			Street Address SEE ABOVE											
City	State	Zip	City	State	Zip									
Director Name EDWARD LONDON			Director Name											
Street Address SEE ABOVE			Street Address											
City	State	Zip	City	State	Zip									
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 <input type="checkbox"/>												
		<table border="1"> <thead> <tr> <th>NUMBER OF SHARES</th> <th>CLASS/SERIES</th> <th>PAR VALUE</th> </tr> </thead> <tbody> <tr> <td>300</td> <td>COMMON</td> <td>NO PAR VALUE</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table>				NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	300	COMMON	NO PAR VALUE			
NUMBER OF SHARES	CLASS/SERIES	PAR VALUE												
300	COMMON	NO PAR VALUE												
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 JEROME LONDON				Date JANUARY 15, 2025										
Signature of Authorized Representative <i>Jerome London</i>														

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040

Website: www.sos.ri.gov