



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 11 2025

BY 3515

STAMP

REC'D 10:09:50
25 FEB 11 PM 2:25:48
STATE OF RHODE ISLAND

1. Entity ID Number 306543	2. Exact name of the Corporation Coughlin Appraisal Services, Inc.
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3. Principal Office Address 133 Oakdale Road	City North Kingstown	State RI	Zip
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4. NAICS Code 541110	6. Brief description of the character of business conducted in Rhode Island Appraisal services.
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 John D. Coughlin			Vice-President Name			Secretary Name John D. Coughlin			Treasurer Name John D. Coughlin		
Street Address 133 Oakdale Road			Street Address			Street Address 133 Oakdale Road			Street Address 133 Oakdale Road		
City North Kingstown		State RI	Zip	City		State	Zip	City North Kingstown		State RI	Zip

8. List ALL directors (names and addresses)						Check the box to indicate an attachment <input type="checkbox"/>					
Director Name John D. Coughlin			Director Name			Director Name			Director Name		
Street Address 133 Oakdale Road			Street Address			Street Address			Street Address		
City North Kingstown		State RI	Zip	City		State	Zip	City		State	Zip

9. Shares Authorized	10. Shares Issued			Check the box to indicate an attachment <input type="checkbox"/>		
This information is currently of record in the Department of State. Changes require an additional filing.	NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	1,000	COMMON	0.01

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 John D. Coughlin, President	Date 2/5/2025
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Signature of Authorized Representative <i>John D. Coughlin</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