



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

MAR 07 2025



BY 99

1. Entity ID Number 000127432		2. Exact name of the Corporation Land Protection, Inc.			
3. Principal Office Address P.O. Box 2115		City Westerly		State RI	Zip 02891
4. NAICS Code 531390	6. Brief description of the character of business conducted in Rhode Island Land preservation and protection				
5. State of Incorporation RI					
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐					
President Name Paul F. Singer			Vice-President Name Paul F. Singer		
Street Address P.O. Box 2115			Street Address P.O. Box 2115		
City Westerly	State RI	Zip 02891	City Westerly	State RI	Zip 02891
Secretary Name Paul F. Singer			Treasurer Name Paul F. Singer		
Street Address P.O. Box 2115			Street Address P.O. Box 2115		
City Westerly	State RI	Zip 02891	City Westerly	State RI	Zip 02891
8. List ALL directors (names and addresses) Check the box to indicate an attachment ☐					
Director Name Paul F. Singer			Director Name		
Street Address P.O. Box 2115			Street Address		
City Westerly	State RI	Zip 02891	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized			10. Shares Issued Check the box to indicate an attachment ☐		
This information is currently of record in the Department of State. Changes require an additional filing.			NUMBER OF SHARES		CLASS/SERIES
			1010		common
					PAR VALUE
					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 Paul F. Singer					Date 2/3/25
Signature of Authorized Representative <i>Paul F. Singer</i>					

MAIL TO:
Division of Business Services
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Website: www.sos.ri.gov