



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
APR 14 2025
BY 5769

1. Entity ID Number 155584		2. Exact name of the Corporation Real Handy Inc			
3. Principal Office Address 50 Masasoit Drive		City Warwick		State RI	Zip 02888
4. NAICS Code 238990		6. Brief description of the character of business conducted in Rhode Island Handyman service			
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 George Matthew Kelley			Vice-President Name		
Street Address 70 Benbridge Ave			Street Address		
City Warwick	State RI	Zip 02888	City	State	Zip
Secretary Name			Treasurer Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized 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.			10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>		
			NUMBER OF SHARES	CLASS/SERIES	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. <u>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.</u>					
Name of Authorized Representative George Matthew Kelley					Date 4/10/25
Signature of Authorized Representative 					

MAIL TO:
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