



State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2020

Corporation

- Filing period: February 1 - May 1
→ Filing Fee: \$50.00
→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

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2025 AUG -5 A 10:19

1. Entity ID Number 790533		2. Exact name of the Corporation Frank Locker Inc										
3. Principal Office Address 306c Dover Point Rd		City Dover	State NH									
		Zip 03820										
4. NAICS Code 611710	6. Brief description of the character of business conducted in Rhode Island Educational Planning consulting											
5. State of Incorporation Massachusetts												
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐												
President Name Frank Locker		Vice-President Name Denise Whittier										
Street Address 306c Dover Point Rd		Street Address 306c Dover Point Rd										
City Dover	State NH	City Dover	State NH									
Zip 03820		Zip 03820										
Secretary Name Denise Whittier		Treasurer Name Frank Locker										
Street Address 306c Dover Point Rd		Street Address 306c Dover Point Rd										
City Dover	State NH	City Dover	State NH									
Zip 03820		Zip 03820										
8. List ALL directors (names and addresses) Check the box to indicate an attachment ☐												
Director Name Frank Locker		Director Name Denise Whittier										
Street Address 306c Dover Point Rd		Street Address 306c Dover Point Rd										
City Dover	State NH	City Dover	State NH									
Zip 03820		Zip 03820										
Director Name		Director Name										
Street Address		Street Address										
City	State	City	State									
Zip		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.		<table border="1"> <thead> <tr> <th>NUMBER OF SHARES</th> <th>CLASS/SERIES</th> <th>PAR VALUE</th> </tr> </thead> <tbody> <tr> <td>15,000</td> <td>CNP</td> <td>\$0.0000</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table>		NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	15,000	CNP	\$0.0000			
NUMBER OF SHARES	CLASS/SERIES	PAR VALUE										
15,000	CNP	\$0.0000										
Changes require an additional filing.												
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. FILED												
Name of Authorized Representative Frank Locker			Date 1 August 2025									
Signature of Authorized Representative 			AUG 05 2025 61K955									

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

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