



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

Annual Report for the year: 2018

Non-Profit Corporation

- Filing period: June 1 - June 30
- Filing Fee: \$20.00
- Penalty: Additional \$25.00 fee if form is not filed by July 30.

1. Entity ID Number 104124		2. Exact name of the Corporation Bookmark Productions, Inc.			
3. State of Incorporation RI		5. Brief description of the character of business conducted in Rhode Island Education of secondary school, college and general public			
4. NAICS Code 611310 - Colleges, Universit <input type="checkbox"/>					
6. Principal Office Address 144 Medway Street		City Providence	State RI	Zip 02906	
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Gary Markoff		Vice-President Name Ronald C. Markoff			
Street Address 35 Chestnut Street		Street Address 144 Medway Street			
City Boston	State ma	Zip 02199	City Providence	State RI	Zip 02906
Secretary Name Joseph Markoff		Treasurer Name Ronald C. Markoff			
Street Address 220 Locust Street 19BC		Street Address 144 Medway Street			
City Philadelphia	State PA	Zip 14106	City Providence	State RI	Zip 02906
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment <input type="checkbox"/>					
Director Name Gary Markoff		Director Name Ronald C. Markoff			
Street Address 35 Chestnut Street		Street Address 144 Medway Street			
City Biston	State MA	Zip 02199	City Providence	State RI	Zip 02906
Director Name Joseph Markoff		Director Name			
Street Address 220 Locust street 19BC		Street Address			
City Philadelphia	State PA	Zip 14106	City	State	Zip
9. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641.					
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.					
<i>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee</i>					
Name of Officer/Authorized Representative Ronald C. Markoff				Date 9/27/2018	
Signature of Officer/Authorized Representative 					

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

FILED
 OCT 02 2018
 BY **38909**