



Instructions for Filing Annual Report for a Corporation

[Section 7-1.2-1501](#) of the General Laws of Rhode Island, 1956, as amended

The attached form is designed to meet minimal statutory filing requirements pursuant to the relevant statutory provision. This form and the information provided are not substitutes for the advice and services of an attorney and/or tax specialist.

This legal document should be typed. All illegible documents will be REJECTED.

How to complete the form:

1. List the entity's ID number. The ID number can be found by looking up your entity in the [Corporate Database](#). Please include this number on your check and refer to it in any future correspondence or filings with the Business Services Division.
2. List the name of the corporation. The entity name can be verified through our [Corporate Database](#). If the entity name has changed an amendment, form [101](#) or form [151](#), must be filed with this office. [Electronic filing](#) may be available.
3. List the address of the principal office of the corporation.
4. List the telephone number of the corporation.
5. List the state or country of incorporation.
6. Provide a brief statement of the character of business in which the corporation is actually engaged in this state. If the corporation is inactive, this section must still be completed.
7. List the names and respective addresses of the officers of the corporation. **Do not leave areas blank.** If the answer is none, write "none." If additional space is needed, check the box and include the entity ID number on the attachment.
8. List the names and respective addresses of the directors of the corporation. **Do not leave areas blank.** If the answer is none, write "none." If additional space is needed, check the box and include the entity ID number on the attachment.
9. The corporation's exact number of authorized shares is of record in this office and can be found on the entity summary screen. If there has been a change in the authorized shares of the corporation, please contact our office.
10. Provide the number of issued shares along with the class, series and par value on the form. **Do not leave this area blank.** If the answer is none, write "none."
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.
12. An Authorized Representative **MUST** sign and date the form.

How to pay the filing fee:

The filing fee is \$50, payable either in person via cash, credit card, or check at the Business Services Division, or by mail to the Business Services Division via check made payable to the R.I. Department of State.

The filing period for this document is January 1 to March 1. Failure to file this report by March 31 will result in a \$25.00 penalty fee.

How to confirm your filing:

Entity records are retrievable and viewable through our website. Successful filings will **NOT** result in a mailed confirmation. Filings that cannot be processed will be posted [online](#) and then returned. To confirm your submission and obtain evidence of your filing:

- Go to our [Corporate Database](#)
- Enter the name or ID number of your entity and click "Search"
- Click on the link to your entity record, scroll down, select "All Filings" and then "View Filing"
- Identify desired type of filing and click on "PDF" under "Files" to view and print the record
- Filing rejections can be viewed online, via the [Rejected Filings Viewer](#) on our website.

How to maintain your status:

The corporation is responsible for filing an annual report each calendar year, excluding the year of incorporation, between January 1 and March 1. A courtesy reminder will be mailed to the registered agent prior to January 1 of each year. Be sure to follow up with your registered agent concerning the filing of this report. Failure to file an annual report or maintain a registered agent/office may result in the revocation of the Certificate of Incorporation/Authority pursuant to RIGL [7-1.2-1310](#) and [7-1.2-1414](#).

Every entity registered with the Rhode Island Department of State - Business Services Division may have filing requirements with the [Rhode Island Division of Taxation](#), even if no business is conducted within Rhode Island for a particular year. Your business may require additional licensing. Please visit our [website](#) for further information.

**Annual Report for the year: _____
Corporation**

→ Filing period: January 1 - March 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by April 1.

STAMP

FOR
SECRETARY OF STATE
USE ONLY

1. Entity ID Number		2. Exact name of the Corporation			
3. Principal Office Address			City	State	Zip
4. Business Phone Number			5. State of Incorporation		
6. Brief description of the character of business conducted in Rhode Island					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name			Vice-President Name		
Street Address			Street Address		
City	State	Zip	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
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		
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.					
<i>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>					
Name of Authorized Representative					Date
Signature of Authorized Representative					
SIGN DOCUMENT HERE					

MAIL TO:**Division of Business Services**

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040**Website:** www.sos.ri.gov