



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

Annual Report for the year: 2018
Corporation

- Filing period: January 1 - March 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by April 1.

1. Entity ID Number 70323		2. Exact name of the Corporation Research Engineering & Manufacturing, Inc.			
3. Principal Office Address 55 Hammarlund Way, Tech II		City Middletown		State RI	Zip 02842
4. NAICS Code 31-33 <i>335999</i>		6. Brief description of the character of business conducted in Rhode Island licensing of patented and trademarked technology to the fastener industry			
5. State of Incorporation RI					
7. List ALL officers (names and addresses)					Check the box to indicate an attachment <input checked="" type="checkbox"/>
President Name Tim Egan			Vice-President Name NONE		
Street Address 55 Hammarlund Way, Tech II			Street Address		
City Middletown	State RI	Zip 02842	City	State	Zip
Secretary Name Laurie J. Mandly			Treasurer Name Laurie J. Mandly		
Street Address 55 Hammarlund Way, Tech II			Street Address 55 Hammarlund Way, Tech II		
City Middletown	State RI	Zip 02842	City Middletown	State RI	Zip 02842
8. List ALL directors (names and addresses)					Check the box to indicate an attachment <input checked="" type="checkbox"/>
Director Name Laurie J. Mandly			Director Name Barry G. Hittner		
Street Address 55 Hammarlund Way, Tech II			Street Address 55 Hammarlund Way, Tech II		
City Middletown	State RI	Zip 02842	City Middletown	State RI	Zip 02842
Director Name Robert G. Flanders			Director Name Ralph Barton		
Street Address 55 Hammarlund Way, Tech II			Street Address 55 Hammarlund Way, Tech II		
City Middletown	State RI	Zip 02842	City Middletown	State RI	Zip 02842
9. Shares Authorized		10. Shares Issued			
This information is currently of record in the Department of State. Changes require an additional filing.		NUMBER OF SHARES		CLASS/SERIES	PAR VALUE
		Class A 500		common	\$.01
		Class B 5,000		common	\$.01
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 <i>Laurie Mandly</i>					Date <i>2/22/18</i>
Signature of Authorized Representative <i>Laurie Mandly</i>					SCN 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

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MAR 02 2018

FORM 630 - Revised: 10/2016

BY *[Signature]*
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**SECTION 7 – OFFICERS CONTINUED
RESEARCH ENGINEERING & MANUFACTURING, INC.**

Claire Bancroft, Assistant Secretary
55 Hammarlund Way, Tech II
Middletown, RI 02842

**SECTION 8 – DIRECTORS CONTINUED
RESEARCH ENGINEERING & MANUFACTURING, INC.**

Meredith R. Curren
55 Hammarlund Way, Tech II
Middletown, RI 02842

Tim Egan
55 Hammarlund Way, Tech II
Middletown, RI 02842

Frank Hoban
55 Hammarlund Way, Tech II
Middletown, RI 02842

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Handwritten Signature
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