



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2009

Filing Period: January 1 - March 1 • **Filing Fee:** \$50.00* • **THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.**

* In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 32412		2. Name of Corporation CROSSMAN ENGINEERING, INC.			
3. Street Address Principal Business Office 151 CENTERVILLE ROAD			City WARWICK	State RI	Zip 02886
4. Business Phone No. 401-738-5660		5. State of Incorporation RI			
6. Brief Description of the Character of Business Conducted in Rhode Island CIVIL ENGINEERING AND LAND SURVEYING					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name STEVEN M. CABRAL			Vice President Name JAMES P. CRONAN III		
Street Address 44 WAGON WHEEL ROAD			Street Address 26 FRANK COURT		
City N. ATTLEBORO	State MA	Zip 02760	City WARREN	State RI	Zip 02885
Secretary Name RUSSELL CROSSMAN			Treasurer Name KAREN ARAUJO		
Street Address 11 SILVER MAPLE DRIVE			Street Address 29 RICHARD CIRCLE		
City COVENTRY	State RI	Zip 02816	City SEEKONK	State MA	Zip 02771
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☒ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name E. RAYMOND CROSSMAN			Director Name STEVEN M. CABRAL		
Street Address 9630 LANDINGS DRIVE			Street Address 44 WAGON WHEEL ROAD		
City PORT ST. LUCIE	State FL	Zip 34986	City N. ATTLEBORO	State MA	Zip 02760
Director Name JAMES P. CRONAN III			Director Name RUSSELL CROSSMAN		
Street Address 26 FRANK COURT			Street Address 11 SILVER MAPLE DRIVE		
City WARREN	State RI	Zip 02885	City COVENTRY	State RI	Zip 02816
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐		
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.			ISSUED SHARES — THIS SECTION <u>MUST</u> BE COMPLETED		
			Number of Shares 400	Class/Series Common	Par Value Par

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.

File Date	1-28-09
Check No.	13237
By:	<i>mnc</i>
FOR SECRETARY OF STATE USE ONLY	

#1

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.

Karen Araujo 1/28/09
Signature Date
Karen Araujo
Print or Type Name
Treasurer
Title



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Street Address			Street Address		
City	State	Zip	City	State	Zip
Secretary Name			Treasurer Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
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Director Name KAREN ARAUJO			Director Name		
Street Address 29 RICHARD CIRCLE			Street Address		
City SEEKONK	State MA	Zip 02771	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
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#2

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.

Karen Araujo 1/28/09
Signature Date
Karen Araujo
Print or Type Name
Treasurer
Title