



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. 487074		2. Name of Corporation SEAMAN ENGINEERING CORP			
3. Street Address Principal Business Office 30 FAITH AVENUE		City AUBURN		State MA	Zip 01501
4. Business Phone No. 508 832-3535		5. State of Incorporation MASSACHUSETTS			
6. Brief Description of the Character of Business Conducted in Rhode Island MECHANICAL DESIGN ENGINEERING - HVAC, Plumbing Fire Protection					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name KEVIN R. SEAMAN			Vice President Name DEBRA SEAMAN, CEO		
Street Address 263 SOUTH ST			Street Address 263 SOUTH ST		
City AUBURN	State MA	Zip 01501	City AUBURN	State MA	Zip 01501
Secretary Name KEVIN SEAMAN			Treasurer Name DEBRA SEAMAN		
Street Address 263 SOUTH ST			Street Address 263 SOUTH ST		
City AUBURN	State MA	Zip 01501	City AUBURN	State MA	Zip 01501
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name KEVIN R. SEAMAN			Director Name None		
Street Address 30 FAITH AVE			Street Address		
City AUBURN	State MA	Zip 01501	City	State	Zip
Director Name None			Director Name None		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED 100			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
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	Class/Series	Par Value
			100	Common	\$1.00

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	1-30-09
Check No.	1548
By:	MNC
FOR SECRETARY OF STATE USE ONLY	

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.

Signature Kevin R. Seaman Date 1-27-09  
Print or Type Name Kevin R. Seaman  
Title President