



**STATE OF RHODE ISLAND  
AND PROVIDENCE PLANTATIONS**  
Office of the Secretary of State

A. Ralph Mollis, Secretary of State  
Corporations Division  
148 W. River St., 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

\* 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. 58448  
2. Name of Corporation Trussco, Inc.  
3. Street Address Principal Business Office 25 Bonneau Road, Post Office Box 839  
City NORTH KINGSTOWN State RI Zip 02852-  
4. Business Phone No. 4012950669  
5. State of Incorporation RHODE ISLAND  
6. Brief Description of the Character of Business Conducted in Rhode Island  
**MANUFACTURING OF TRUSSES**

**7. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT)  FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name Richard K. Duckworth, Jr. Street Address 735 East Road City Scituate State RI Zip 02857	Vice President Name Lorraine D. Duckworth Street Address 735 East Road City Scituate State RI Zip 02857
Secretary Name Richard K. Duckworth, Jr. Street Address 735 East Road City Scituate State RI Zip 02857	Treasurer Name Lorraine D. Duckworth Street Address 735 East Road City Scituate State RI Zip 02857

**8. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT)  FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name Richard K. Duckworth, Jr. Street Address 735 East Road City Scituate State RI Zip 02857	Director Name Lorraine D. Duckworth Street Address 735 East Road City Scituate State RI Zip 02857
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**9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)  10. SHARES ISSUED ("X" BOX FOR ATTACHMENT)**

AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
500	NO PAR VALUE		500	Common	No Par Value

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.



**FILED**

File Date FEB 20 2009  
Check No. By 16256  
By: \_\_\_\_\_  
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 [Signature] Date 2 FEB 2009  
Richard K. Duckworth, Jr. FOR R&D  
Print or Type Name  
President  
Title