

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

Fee: \$50.00

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040[| LOGOUT |](#)**Business Corporation  
Annual Report**

Filing Period: January 1 - March 1



Help with this form

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.

**ANNUAL REPORT YEAR:** ~~2011~~ 2012**1. Corporate ID No.** 000022798**2. Name of Corporation** W. E. Jackson & Co., Inc.**3. Street Address Principal Business Office:**

No. and Street: 225 PUTNAM AVENUE

City or Town: JOHNSTON

State: RI

Zip: 02919

Country: USA

**4. Business Phone No.**

231-0800

**5. State of Incorporation**

State: RI

**6. Brief Description of the Character of Business Conducted in Rhode Island**

BOOKBINDING-- EMBOSSEING FOIL STAMPING

**FILED**

DEC 30 2011

TV 4200

**7. Names and Addresses of the Officers and Directors:**

All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete.

Secretary

Treasurer

RONALD JACKSON

ROBERT E. JACKSON

225 PUTNAM AVE.

JOHNSTON, RI 02919

SAME " " "

Delete	Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
<input type="checkbox"/>	PRESIDENT	DONALD JACKSON	225 PUTNAM AVENUE JOHNSTON, RI 02919 USA

Select From Below

Title:

First Name: RONALDMiddle Name: E.Last Name: JACKSON

Suffix:

Address: 225 PUTNAM AVE.City: JOHNSTONState: RI.Zip: 02919

Country:

Clear

Add

**8. Shares Authorized and Issued**

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares Number of Shares	Total Issued and Outstanding Num of Shares
CNP		\$0.00	600.00	<del>600.00</del> 150

**9. 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.**

**Filer's Contact Information**

(Enter a contact name, mailing address and email.)

Contact Name: Robert E. JacksonBusiness Name: W. E. JACKSON & Co.No. and Street: 225 PUTNAM AVE  
JOHNSTON, RI. 02919

- Same Address as -

City or Town:

State:

Zip:

Country:

Contact Phone:

ext:

Contact Email:

Clear

Please provide an email address to receive an expedited response from us if the filing is rejected for any reason. If no email address is provided, we will respond by mail.

**Signed this 27 Day of December, 2011 at 1:50:28 PM. This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.**

By

Robert E. Jackson, Jr.

Signature of Authorized Representative of the Corporation

**FILED**

DEC 30 2011

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