



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 2012**

**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. 505094		2. Name of Corporation Forge Industries Company, Inc.			
3. Street Address Principal Business Office 58 Forge Road			City Sharon	State Massachusetts	Zip 02067
4. Business Phone No. (508) 668-4608		5. State of Incorporation Massachusetts			
6. Brief Description of the Character of Business Conducted in Rhode Island Fireproofing Contractor					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name William H. Goodman			Vice President Name		
Street Address 58 Forge Road			Street Address		
City Sharon	State Massachusetts	Zip 02067	City	State	Zip
Secretary Name Samuel L. Black			Treasurer Name William H. Goodman		
Street Address 93 Sevlard Road			Street Address 58 Forge Road		
City Newton	State Massachusetts	Zip	City Sharon	State Massachusetts	Zip 02067
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name William H. Goodman			Director Name		
Street Address 58 Forge Road			Street Address		
City Sharon	State Massachusetts	Zip 02067	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED 20,000			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 <b>MUST</b> BE COMPLETED		
			Number of Shares 300	Class/Series Common	Par Value No 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.

<b>FILED</b>	
File Date	JAN 19 2012
Check No.	5719
By	<u>William H. Goodman</u>
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.

William H. Goodman 1/16/12  
Signature Date  
William H. Goodman  
Print or Type Name  
President  
Title