RI SOS Filing Number: 201288308310 Date: 01/20/2012 4:00 PM

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

A. Ralph Mollis, *Secretary of Stat*
Corporations Divisio
148 W. River Stree
Providence, RI 02904-261
401.222.304

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.	2. Name of Corporation
114300	C.H. Nickerson & Co.,Inc.

3. Street Address Principal Business Office	City	State	Zip
49 Hayden Hill Rd.	Torrington	CT	06790

4. Business Phone No.	5. State of Incorporation
860-489-0455	Connecticut

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

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

President Name	Street Address	City	State	Zip
Jonathan Miller	35 Rockwell Court	Goshen	CT	06756

Vice President Name	Street Address	City	State	Zip
Stanley Bujalski	95 Partridge Run	Bristol	CT	06010

Secretary Name	Street Address	City	State	Zip
Paul Griffin	157 Migeon Ave.	Torrington	CT	06790

Treasurer Name	Street Address	City	State	Zip
Arthur Machen	270 Cliffside Drive	Torrington	CT	06790

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

Director Name	Street Address	City	State	Zip
Brian Nickerson	49 Haydon Hill Rd.	Torrington	CT	06790

Director Name	Street Address	City	State	Zip
James Nickerson	1184 Torringford St.	Torrington	CT	06790

Director Name	Street Address	City	State	Zip

Director Name	Street Address	City	State	Zip

9. SHARES AUTHORIZED

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.

10. SHARES ISSUED ***("X" BOX FOR ATTACHMENT)*** ☐

ISSUED SHARES — THIS SECTION MUST BE COMPLETED

Number of Shares	Class/Series	Par Value
326	Common A	0
3406	Common B	0

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.

Under penalty of perjury, I declare and affirm that I have examined this repor including any accompanying schedules and statements, and that all statement contained herein are true and correct.

Arthur Machen 1/17/12
Signature *Date*

Arthur Machen
Print or Type Name

Treasurer
Title

FILED
File Date _____
Check No. JAN 2 0 2012
By: BY 59748
72313-35-700505
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Form 630 Rev. 08/08