



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. 64982	2. Name of Corporation MARC N. NYBERG ASSOCIATES, INC.
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3. Street Address Principal Business Office 501 GREAT ROAD, UNIT 104	City NORTH SMITHFIELD	State RI	Zip 02896
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4. Business Phone No. (401) 762-2870	5. State of Incorporation RHODE ISLAND
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6. Brief Description of the Character of Business Conducted in Rhode Island  
GENERAL ENGINEERING AND SURVEYING BUSINESS.

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

President Name MARC N. NYBERG	Vice President Name MARC N. NYBERG
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Street Address 5 QUAKER ROAD	Street Address 5 QUAKER ROAD
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City CUMBERLAND	State RI	Zip 02864	City CUMBERLAND	State RI	Zip 02864
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Secretary Name MARC N. NYBERG	Treasurer Name MARC N. NYBERG
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Street Address 5 QUAKER ROAD	Street Address 5 QUAKER ROAD
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City CUMBERLAND	State RI	Zip 02864	City CUMBERLAND	State RI	Zip 02864
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**8. NAMES AND ADDRESSES OF THE DIRECTORS: (X BOX FOR ATTACHMENT)  FILE IN SPACES BEFORE USING ATTACHMENTS**

Director Name NONE	Director Name
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Street Address	Street Address
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City	State	Zip	City	State	Zip
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Director Name	Director Name
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Street Address	Street Address
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City	State	Zip	City	State	Zip
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**9. SHARES AUTHORIZED** **10. SHARES ISSUED (X BOX FOR ATTACHMENT)**

ISSUED SHARES --- THIS SECTION MUST BE COMPLETED

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.	Number of Shares	Class/Series	Par Value
	100	COMMON	\$1.00 PAR VALU
	THIS SECTION MUST BE COMPLETED		

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 report including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Marc Nyberg 2-21-12  
Signature Date

MARC N. NYBERG  
Print or Type Name

PRESIDENT  
Title

**FILED**  
File Date: MAR 01 2012  
Check No: 3477  
By: [Signature]  
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