



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State - Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov/business

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR **2012**

Filing Period: June 1 - June 30 • This report must be typed or printed legibly.

Filing Fee: \$20.00 • FAILURE TO FILE THIS REPORT BY JULY 30 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. 63738		2. Exact name of the Corporation R.I.C.E. Rhode Island Consulting Engineers			
3. State of Incorporation Rhode Island		4. Brief description of the character of business conducted in Rhode Island To accomplish fair and intelligent legislation relating to engineers			
5. Principal office address 243 North Main Street		City Providence	State RI	Zip 02903	
President Name Tom Cabana		Vice-President Name George Monaghan			
Street Address 166 Valley Street, Suite 101, Bldg. 6M		Street Address 640 George Washington Highway, Bldg. B, Suite 100			
City Providence	State RI	Zip 02909	City Lincoln	State RI	Zip 02865
Secretary Name John Shevlin		Treasurer Name George Monaghan			
Street Address 8 Blackstone Valley Place		Street Address 640 George Washington Highway, Bldg. B, Suite 100			
City Lincoln	State RI	Zip 02865	City Lincoln	State RI	Zip 02865
☒ I am a corporation organized under the laws of the State of Rhode Island.					
Director Name Bharat Patel		Director Name Chris Feeney			
Street Address 10 Dorrance Street		Street Address 295 Promenade Street			
City Providence	State RI	Zip 02903	City Providence	State RI	Zip 02905
Director Name Carl Adamo		Director Name Patty Steere			
Street Address 8 Blackstone Valley Place		Street Address 2374 Post Road #201			
City Lincoln	State RI	Zip 02865	City Warwick	State RI	Zip 02886
THIS SCHEDULE IS FOR THE STATE OF RHODE ISLAND					
This information is currently of record in the Office of the Secretary of State. Changes require filing Form 641.					

This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

FILED

JUN 21 2012

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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.

Tom Cabana
Signature of Officer

6/1/2012
Date

Tom Cabana

Print or Type Name of Officer

President

Title of Officer

8. Name and address of Board of Directors

Lou DiLucchio
200 Main Street
Pawtucket, RI 02860

Dave Freeman
225 Chapman Street, 4th Floor
Providence, RI 02908

Joe D'Alesio
6 Blackstone Valley Place, Suite 101
Lincoln, RI 02865

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