



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

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2013

Filing Period: January 1 - March 1 - This report must be typed or printed legibly.

Filing Fee: \$50.00 - FAILURE TO FILE THIS REPORT BY MARCH 31 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. 123268		2. Exact name of the Corporation Advanced Civil Design, Inc.			
3. Principal office address 7 Countryside Lane			City Scituate	State RI	Zip 02857
4. Business Phone No. 354-5671		5. State of Incorporation R.I.			
6. Brief description of the character of business conducted in Rhode Island provide professional engineering services					
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name Nicholas J. Piampiano			Vice-President Name Curtis S. Ruotolo		
Street Address 7 Countryside Lane			Street Address 6 Vernon St.		
City Scituate	State RI	Zip 02857	City Greenville	State RI	Zip 02828
Secretary Name Nicholas J. Piampiano			Treasurer Name Curtis S. Ruotolo		
Street Address 7 Countryside Lane			Street Address 6 Vernon St.		
City Scituate	State RI	Zip 02857	City Greenville	State RI	Zip 02828
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name none			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED			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.			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
			100	common	\$1.00

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.

File Date _____

Check No _____

By: _____

FOR SECRETARY OF STATE USE ONLY

FILED

JAN 30 2013

1768

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.

Nicholas J. Piampiano 1/26/13
 Signature of Authorized Representative Date

Nicholas J. Piampiano

Print or Type Name of Authorized Representative