



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 **2015**

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. <b>505757</b>		2. Exact name of the Corporation <b>FDM Consulting Group, Inc.</b>								
3. Principal office address <b>63 Blakeley Street #204</b>			City <b>Woonsocket</b>	State <b>RI</b>	Zip <b>02895</b>					
4. Business Phone No. <b>(401) 639-0666</b>		5. State of Incorporation <b>Rhode Island</b>								
6. Brief description of the character of business conducted in Rhode Island <b>Human Service, Construction Management, Fundraising- Profit and Nonprofit</b>										
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>										
President Name <b>Frank DiMaio</b>			Vice-President Name <b>Frank DiMaio</b>							
Street Address <b>63 Blakeley Street #204</b>			Street Address <b>63 Blakeley Street #204</b>							
City <b>Woonsocket</b>	State <b>RI</b>	Zip <b>02895</b>	City <b>Woonsocket</b>	State <b>RI</b>	Zip <b>02895</b>					
Secretary Name <b>Frank DiMaio</b>			Treasurer Name <b>Frank DiMaio</b>							
Street Address <b>63 Blakeley Street #204</b>			Street Address <b>63 Blakeley Street #204</b>							
City <b>Woonsocket</b>	State <b>RI</b>	Zip <b>02895</b>	City <b>Woonsocket</b>	State <b>RI</b>	Zip <b>02895</b>					
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>										
Director Name <b>Frank DiMaio</b>			Director Name							
Street Address <b>63 Blakeley Street #204</b>			Street Address							
City <b>Woonsocket</b>	State <b>RI</b>	Zip <b>02895</b>	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		
						500	Common	No Par		

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 CORPORATIONS DIV  
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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

By 241174

**FILED**

**JAN 29 2015**

KM

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.

*Frank DiMaio* 1/27/15  
 Signature of Authorized Representative Date

**Frank DiMaio**

Print or Type Name of Authorized Representative