



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. 10115		2. Exact name of the Corporation Thornley-DeGrasse Rigging Co., Inc.			
3. Principal office address 171-176 Dunnell Avenue		City Pawtucket	State RI	Zip 02860	
4. Business Phone No. 401-725-9229		5. State of Incorporation Rhode Island			
6. Brief description of the character of business conducted in Rhode Island Dismantling, rigging, erecting and moving machinery and metal products.					
PRESIDENT					
President Name Steven S. Thornley			Vice-President Name Steven S. Thornley		
Street Address 13 Springdale Avenue			Street Address 13 Springdale Avenue		
City North Providence	State RI	Zip 02904	City North Providence	State RI	Zip 02904
Secretary Name Steven S. Thornley			Treasurer Name Steven S. Thornley		
Street Address 13 Springdale Avenue			Street Address 13 Springdale Avenue		
City North Providence	State RI	Zip 02904	City North Providence	State RI	Zip 02904
DIRECTORS (NAME AND ADDRESS)					
Director Name Steven S. Thornley			Director Name		
Street Address 13 Springdale Avenue			Street Address		
City North Providence	State RI	Zip 02904	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
SHARES					
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	
		400	Common	No Par Value	

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.

Signature of Authorized Representative

Date

Steven S. Thornley, President

Print or Type Name of Authorized Representative

FILED

MAR 12 2015

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