

## 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 • F	AILURE TO FII	LE THIS REPORT BY M	IARCH 31 WILL RES	SULT IN A \$25.00 PEN	ALTY FEE.	
1. Entity ID No.	1	ne of the Corporation				
147363	C.B. RA	ANDALL & SONS	CONSTRUCTION	ON CORP.		
3. Principal office address 124 WAYNE ST			City WARWICK	State RI	Zip <b>02889</b>	
4. Business Phone No. 401-739-9863			5. State of Incorporation RHODE ISLAND			
6. Brief description of the char TO PROVIDE HAULIN			1			
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President Name CHON O RANDALL			Vice-President Name WILLIAM H RANDALL III			
Street Address 124 WAYNE ST			Street Address 124 WAYNE ST			
City WARWICK	State RI	Zip <b>02889</b>	City WARWICK	State <b>RI</b>	Zip <b>02889</b>	
Secretary Name TIMOTHY A RANDALL			Treasurer Name CHON O RANDALL			
Street Address 124 WAYNE ST			Street Address 124 WAYNE ST			
City WARWICK	State <b>RI</b>	Zip <b>02889</b>	City State Zip 02889			
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Director Name CHON O RANDALL			Director Name			
Street Address 124 WAYNE ST			Street Address			
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Director Name			Director Name			
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his information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of Instruction sheet.			NONE			
This report must be executed					ds of a receiver or tr	ustee,
		st be executed on behalf of I		receiver or trustee. erjury, I declare and affi	irm that I have exa	mined
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**FILED** 

AUG 31 2015

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

Signature of Authorized Representative

Date

**CHON O RANDALL** 

Form No. 630 Revised: 01/2012 Print or Type Name of Authorized Representative