



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 2016

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. <u>000148909</u>		2. Exact name of the Corporation <u>Kleinfelder Northeast, Inc.</u>	
3. Principal office address <u>215 First Street, Ste 320</u>		City <u>Cambridge</u>	State <u>MA</u>
		Zip <u>02142</u>	
4. Business Phone No. <u>(617) 497-7800</u>		5. State of Incorporation <u>Massachusetts</u>	
6. Brief description of the character of business conducted in Rhode Island <u>Engineering & Consulting Services</u>			
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>			
President Name <u>Joseph Cormier</u>		Vice-President Name <u>NA</u>	
Street Address <u>215 First Street, Ste 320</u>		Street Address <u>-</u>	
City <u>Cambridge</u>	State <u>MA</u>	City <u>-</u>	State <u>-</u>
Secretary Name <u>Robert Rink</u>		Treasurer Name <u>Carl D. Lowman</u>	
Street Address <u>215 First Street, Ste 320</u>		Street Address <u>500 West C Street, Ste 1200</u>	
City <u>Cambridge</u>	State <u>MA</u>	City <u>San Diego</u>	State <u>CA</u>
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		9. SHARES AUTHORIZED	
Director Name <u>Kevin E Pottmeyer</u>		Director Name <u>Joseph Cormier</u>	
Street Address <u>311 Weed Rd.</u>		Street Address <u>215 First Street, Ste 320</u>	
City <u>Shelburne</u>	State <u>VT</u>	City <u>Cambridge</u>	State <u>MA</u>
Director Name <u>Robert Rink</u>		Director Name <u>Mary E. Loden</u>	
Street Address <u>215 First Street, Ste 320</u>		Street Address <u>215 First Street, Ste. 320</u>	
City <u>Cambridge</u>	State <u>MA</u>	City <u>Cambridge</u>	State <u>MA</u>
10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		11. 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 <u>25,100</u>	CLASS/SERIES <u>Common</u>
		PAR VALUE <u>0</u>	

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

DEC 03 2015

By 262479

A.A. 10:29 A.M.

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

Charles S. Alpert

Print or Type Name of Authorized Representative

11/30/15
Date

Kleinfelder Northeast, Inc.
ID No 000148909

Annual Report For the year 2016.

7. officers (Cont'd)

Assistant Secretary - Charles S. Alpert
550 West C Street, Ste 1200
San Diego, CA 92101

Assistant Secretary - Mary E. Loden
215 First Street, Ste 320
Cambridge, MA 02142