



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. 65619		2. Exact name of the Corporation Joseph A. Sisson, Inc.			
3. Principal office address 381 Winchester Drive		City South Kingstown	State RI	Zip 02879	
4. Business Phone No. 401-789-1251		5. State of Incorporation Rhode Island			
6. Brief description of the character of business conducted in Rhode Island General Investments					
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name Joseph A. Sisson		Vice-President Name Wendy H. Sisson			
Street Address 381 Winchester Drive		Street Address 381 Winchester Drive			
City South Kingstown	State RI	Zip 02879	City South Kingstown	State RI	Zip 02879
Secretary Name Same as above		Treasurer Name Same as above			
Street Address		Street Address			
City	State	Zip	City	State	Zip
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name Joseph A. Sisson		Director Name Wendy H. Sisson			
Street Address 381 Winchester Drive		Street Address 381 Winchester Drive			
City South Kingstown	State RI	Zip 02879	City South Kingstown	State RI	Zip 02879
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	None

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.

File Date _____
 Check No _____
 By _____
 FOR SECRETARY OF STATE USE ONLY

FILED

JAN 06 2015

BY DS 1540

Joseph A. Sisson 1/2/2016
 Signature of Authorized Representative Date

Joseph A. Sisson
 Print or Type Name of Authorized Representative