



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Molis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2016

Filing Period: January 1 - March 1 • Filing Fee: \$50.00* THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK
* In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 25941		2. Name of Corporation WESTERN MASS BLASTING CORP.			
3. Street Address Principal Business Office PO BOX 488			City HOPE VALLEY	State RI	Zip 02832
4. Business Phone No. 401-377-1000		5. State of Incorporation MA			
6. Brief Description of the Character of Business Conducted in Rhode Island DRILLING & BLASTING					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name JEFFREY J GILMAN			Vice President Name JAMES L SILVA		
Street Address 12 EVANS LANE			Street Address 13 JENKS ROAD		
City HOPE VALLEY	State RI	Zip 02832	City FOSTER	State RI	Zip 02825
Secretary Name ROLAND NORMANDIN			Treasurer Name JEFFREY J GILMAN		
Street Address 661 MAIN ST PO BOX 253			Street Address 12 EVANS LANE		
City NO. OXFORD	State MA	Zip 01537	City HOPE VALLEY	State RI	Zip 02832
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name JEFFREY J GILMAN			Director Name DIANE A GILMAN		
Street Address 12 EVANS LANE			Street Address 176 ARCADIA RD		
City HOPE VALLEY	State RI	Zip 02832	City HOPE VALLEY	State RI	Zip 02832
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
AUTHORIZED SHARES					
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
7500	COMMON	NO PAR VALUE	200	COMMON	
10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
ISSUED SHARES — THIS SECTION MUST BE COMPLETED					
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	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.

FILED

MAR 02 2016

934005

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 Jeffrey J Gilman Date 2/29/16

JEFFREY J GILMAN
Print or Type Name

TREASURER

Title

File Date _____	BY <u>934005</u>
Check No. _____	
By: _____	
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