



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

Annual Report for the year: 2017
Corporation

- Filing period: January 1 - March 1
→ Filing Fee: \$50.00
→ Penalty: Additional \$25.00 fee if form is not filed by April 1.

FILED

JAN 23 2017

BY 4816

1. Entity ID Number 117489		2. Exact name of the Corporation N. JACKSON CONSTRUCTION, INC.			
3. Principal Office Address 83 Water Street		City Warren		State RI	Zip 02885
4. NAICS Code 23 - Construction		6. Brief description of the character of business conducted in Rhode Island Roofing Construction of all types including Residential and Commercial, Construction and Renovations of all types.			
5. State of Incorporation Rhode Island					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Noel E. Jackson			Vice-President Name Noel E. Jackson		
Street Address 83 Water Street			Street Address 83 Water Street		
City Warren	State RI	Zip 02885	City Warren	State RI	Zip 02885
Secretary Name Noel E. Jackson			Treasurer Name Noel E. Jackson		
Street Address 83 Water Street			Street Address 83 Water Street		
City Warren	State RI	Zip 02885	City Warren	State RI	Zip 02885
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name Noel E. Jackson			Director Name		
Street Address 83 Water Street			Street Address		
City Warren	State RI	Zip 02885	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized Check the box to indicate an attachment <input type="checkbox"/>					
This information is currently of record in the Department of State.					
Changes require an additional filing.					
10. Shares Issued		Check the box to indicate an attachment <input type="checkbox"/>			
NUMBER OF SHARES		CLASS/SERIES		PAR VALUE	
100		Common		No Par Value	
11. 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.					
Name of Authorized Representative Noel E. Jackson					Date 1/8/17
Signature of Authorized Representative 					