



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.

1. Entity ID Number <b>3814</b>		2. Exact name of the Corporation <b>Statewide Plumbing &amp; Heating Co., Inc.</b>			
3. Principal Office Address <b>160 North View Avenue</b>		City <b>Cranston</b>		State <b>RI</b>	Zip <b>02920</b>
4. NAICS Code <b>23 - Construction</b>		6. Brief description of the character of business conducted in Rhode Island <b>Plumbing and heating service and repair and drain cleaning.</b>			
5. State of Incorporation <b>Rhode Island</b>					
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name <b>Philip J. Mangione</b>			Vice-President Name <b>Carlos Cardeal</b>		
Street Address <b>55 Cricket Circle</b>			Street Address <b>16 Douglas Drive</b>		
City <b>East Greenwich</b>	State <b>RI</b>	Zip <b>02818</b>	City <b>Cumberland</b>	State <b>RI</b>	Zip <b>02864</b>
Secretary Name <b>Donna M. Mangione</b>			Treasurer Name <b>Michael Moreira</b>		
Street Address <b>55 Cricket Circle</b>			Street Address <b>126 Dexter Street</b>		
City <b>East Greenwich</b>	State <b>RI</b>	Zip <b>02818</b>	City <b>Cumberland</b>	State <b>RI</b>	Zip <b>02864</b>
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name <b>Philip J. Mangione</b>			Director Name <b>Donna M. Mangione</b>		
Street Address <b>55 Cricket Circle</b>			Street Address <b>55 Cricket Circle</b>		
City <b>East Greenwich</b>	State <b>RI</b>	Zip <b>02818</b>	City <b>East Greenwich</b>	State <b>RI</b>	Zip <b>02818</b>
Director Name <b>Anthony L. Emma</b>			Director Name		
Street Address <b>30 DeSano Drive</b>			Street Address		
City <b>Narragansett</b>	State <b>RI</b>	Zip <b>02882</b>	City	State	Zip
9. Shares Authorized This information is currently of record in the Department of State. Changes require an additional filing.			10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>		
			NUMBER OF SHARES CLASS/SERIES PAR VALUE		
			1000 common no par		
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. <b>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.</b>					
Name of Authorized Representative <b>Donna M. Mangione</b>				Date <b>2-10-2017</b>	
Signature of Authorized Representative 					

**FILED**

**FEB 13 2017**

BY **18347 A.A.**