



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 34536		2. Exact name of the Corporation Resource Construction, Inc.	
3. Principal Office Address 981 Main Street		City West Warwick	State RI
		Zip 02893	
4. NAICS Code 23 - Construction	6. Brief description of the character of business conducted in Rhode Island General construction.		
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 Edward P. Flanagan, Jr.		Vice-President Name Edward P. Flanagan, Jr.	
Street Address 981 Main Street		Street Address 981 Main Street	
City West Warwick	State RI	City West Warwick	State RI
Zip 02893		Zip 02893	
Secretary Name Edward P. Flanagan, Jr.		Treasurer Name Edward P. Flanagan, Jr.	
Street Address 981 Main Street		Street Address 981 Main Street	
City West Warwick	State RI	City West Warwick	State RI
Zip 02893		Zip 02893	
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
Director Name Edward P. Flanagan, Jr.		Director Name	
Street Address 981 Main Street		Street Address	
City West Warwick	State RI	City	State
Zip 02893		Zip	
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
9. Shares Authorized		10. Shares Issued 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.		NUMBER OF SHARES	
		CLASS/SERIES	
		PAR VALUE	
		1,000	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. 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 Edward P. Flanagan, Jr.		Date 1-30-17	
Signature of Authorized Representative <i>E. Flanagan</i>			

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

FILED
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BY 2972 DS

FORM 630 - Revised: 10/2016