



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>2032</b>		2. Exact name of the Corporation <b>Baseline Construction, Inc.</b>			
3. Principal Office Address <b>2 Duchess Way</b>			City <b>Greenville</b>	State <b>RI</b>	Zip <b>02828</b>
4. NAICS Code <b>23 - Construction</b>		6. Brief description of the character of business conducted in Rhode Island <b>Planning construction, plumbing of new and older buildings.</b>			
5. State of Incorporation <b>RI</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>Thomas Grundy</b>			Vice-President Name <b>John Grundy</b>		
Street Address <b>2 Duchess Way</b>			Street Address <b>23 Ernest Street</b>		
City <b>Greenville</b>	State <b>RI</b>	Zip <b>02828</b>	City <b>Smithfield</b>	State <b>RI</b>	Zip <b>02917</b>
Secretary Name <b>Catherine Grundy</b>			Treasurer Name <b>Thomas Grundy</b>		
Street Address <b>2 Duchess Way</b>			Street Address <b>2 Duchess Way</b>		
City <b>Greenville</b>	State <b>RI</b>	Zip <b>02828</b>	City <b>Greenville</b>	State <b>RI</b>	Zip <b>02828</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>Thomas Grundy</b>			Director Name <b>Catherine Grundy</b>		
Street Address <b>2 Duchess Way</b>			Street Address <b>2 Duchess Way</b>		
City <b>Greenville</b>	State <b>RI</b>	Zip <b>02828</b>	City <b>Greenville</b>	State <b>RI</b>	Zip <b>02828</b>
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized			10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>		
This information is currently of record in the Department of State.  Changes require an additional filing.			NUMBER OF SHARES		
			CLASS/SERIES		
			PAR VALUE		
			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. <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>Thomas Grundy</b>					Date <b>2/19/17</b>
Signature of Authorized Representative					

**FILED**  
SIGN DOCUMENT HERE  
**FEB 23 2017**

BY 8453 DS