



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 8318	2. Exact name of the Corporation RBC Industries, Inc.
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3. Principal Office Address 80 Cypress Street	City Warwick	State RI	Zip 02888
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4. NAICS Code 31-33 - Manufacturing	6. Brief description of the character of business conducted in Rhode Island Epoxy and related products
5. State of Incorporation RI	

7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Kay H. Duckworth, Jr.			Vice-President Name Jean M. Duckworth		
Street Address 80 Cypress Street			Street Address 80 Cypress Street		
City Warwick	State RI	Zip 02888	City Warwick	State RI	Zip 02888
Secretary Name Kay H. Duckworth, Jr.			Treasurer Name Jean M. Duckworth		
Street Address 80 Cypress Street			Street Address 80 Cypress Street		
City Warwick	State RI	Zip 02888	City Warwick	State RI	Zip 02888

8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name Kay H. Duckworth, Jr.			Director Name Jean M. duckwoth		
Street Address 80 Cypress Street			Street Address 80 Cypress Street		
City Warwick	State RI	Zip 02888	City Warwick	State RI	Zip 02888
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	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 Check the box to indicate an attachment <input type="checkbox"/>		
	NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
	100	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 Kay H Duckwoth, Jr Pres	Date 1/26/17
Signature of Authorized Representative 	SIGN DOCUMENT HERE 43605

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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