RI SOS Filing Number: 201737280130 Date: 3/3/2017 4:00:00 PM 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. 2. Exact name of the Corporation 1. Entity ID Number JACKSON BOOKBINDING CO., INC. 22798 State 3. Principal Office Address 02828 **GREENVILLE** RI 21 LARK INDUSTRIAL PARKWAY 6. Brief description of the character of business conducted in Rhode Island 4, NAICS Code 42 - Wholesale Trade **BOOK BINDER, FOIL STAMPER** 5. State of Incorporation RHODE ISLAND Check the box to indicate an attachment 7. List ALL officers (names and addresses) Vice-President Name RONALD E. JACKSON President Name DONALD JACKSON Street Address 21 LARK INDUSTRIAL PARKWAY Street Address 21 LARK INDUSTRIAL PARKWAY State RI <sup>Zip</sup> 02828 Zip 02828 City GREENVILLE City GREENVILLE Treasurer Name RONALD E. JACKSON Secretary Name RONALD E. JACKSON Street Address 21 LARK INDUSTRIAL PARKWAY Street Address 21 LARK INDUSTRIAL PARKWAY State RI State RI Zip 02828 <sup>Zip</sup> 02828 City GREENVILLE City GREENVILLE Check the box to indicate an attachment 8. List ALL directors (names and addresses) Director Name RONALD E. JACKSON Director Name DONALD A. JACKSON Street Address 21 LARK INDUSTRIAL PARKWAY Street Address 21 LARK INDUSTRIAL PARKWAY State RI Zip **02828** State City GREENVILLE City GREENVILLE 02828 Director Name Director Name Street Address Street Address State Žip State City Citv Check the box to indicate an attachment L 10. Shares Issued 9. Shares Authorized PAR VALUE This information is currently of record in the NUMBER OF SHARES CLASS/SERIES Department of State. COMMON **NO PAR** 150 Changes require an additional filing. 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 RONALD E. JACKSON Signature of Authorized Representative <del>IAR-**0 9** 2017</del> **Division of Business Services** 148 W. River Street, Providence, Rhode Island 02904-2615

FORM 630 - Revised: 02/2017

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