



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
 Office of the Secretary of State - Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR **2017**

Filing Period: January 1 - March 1 • This report must be typed or printed legibly.
 Filing Fee: \$50.00 • FAILURE TO FILE THIS REPORT BY MARCH 31 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. 101551		2. Exact name of the Corporation MESCO CORPORATION			
3. Principal office address 1676 East Main Road			City Portsmouth	State RI	Zip 02871
4. Business Phone No. 401-683-2677			5. State of Incorporation RHODE ISLAND		
6. Brief description of the character of business conducted in Rhode Island The manufacture and sale of mechanical seals and related products					
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name Billy D. Watson			Vice-President Name Billy D. Watson		
Street Address 34057 Stonewood Loop			Street Address 34057 Stonewood Loop		
City Whitney	State TX	Zip 76692	City Whitney	State TX	Zip 76692
Secretary Name Linda A. Watson			Treasurer Name Linda A. Watson		
Street Address 34057 Stonewood Loop			Street Address 34057 Stonewood Loop		
City Whitney	State TX	Zip 76692	City Whitney	State TX	Zip 76692
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name Billy D. Watson			Director Name Linda A. Watson		
Street Address 34057 Stonewood Loop			Street Address 34057 Stonewood Loop		
City Whitney	State TX	Zip 76692	City Whitney	State TX	Zip 76692
Director Name Apryl M. Jordan			Director Name Kristi D. Scates		
Street Address 7202 Wedgehollow Court			Street Address 613 Pheasant Street 515 Rolling Hill Lane		
City Spring	State TX	Zip 77389	City Coppell	State TX	Zip 75019
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
			100	COMMON	NO PAR VALUE

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.

File Date _____
 Check No _____
 By: _____
 FOR SECRETARY OF STATE USE ONLY

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.

Billy D. Watson
 Signature of Authorized Representative Date _____
Billy D. Watson, President
 Print or Type Name of Authorized Representative

FILED
MAR 20 2017

BY 8484 DS