



**State of Rhode Island and Providence Plantations  
Office of the Secretary of State**

No Fee

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

**Business Corporation  
Annual Report - Amended**

(Section 7-1.2-1501(e) of the General Laws of Rhode Island, 1956, as amended)

**This form is only to be used to amend the current annual report on file with this office.**

**ANNUAL REPORT YEAR:** 2017

**1. Corporate ID No.** 000017597

**2. Name of Corporation** L. E. Whipple Pump Co.

**3. Street Address Principal Business Office:**

No. and Street: 1063 POUND HILL ROAD  
P.O. BOX 557

City or Town: SLATERSVILLE State: RI Zip: 02876 Country: USA

**4. Business Phone No.**

401-765-4882

**5. State of Incorporation**

State: RI

**ARTICLE III**

Using the following NAICS codes, please select the code that best describes your business.

NAICS Code  0885

**6. Brief Description of the Character of Business Conducted in Rhode Island**

WATER SYSTEM INSTALLATION & SERVICE

**7. Names and Addresses of the Officers and Directors:**

**All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete.**

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	VALENTINA WHIPPLE	1063 POUND HILL RD, PO BOX 66 SLATERSVILLE, RI 02876 USA
TREASURER	VALENTINA WHIPPLE	1063 POUND HILL RD, PO BOX 66

		SLATERSVILLE, RI 02876 USA
SECRETARY	VALENTINA WHIPPLE	1063 POUND HILL RD. PO BOX 66 SLATERSVILLE, RI 02876 USA
VICE PRESIDENT	DAVID L WHIPPLE	1063 POUND HILL RD, PO BOX 66 SLATERSVILLE, RI 02876 USA

**8. Shares Authorized and Issued**

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares <i>Number of Shares</i>	Total Issued and Outstanding <i>Num of Shares</i>
CNP		\$0.0000	600.00	110

**9. 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.**

**Signed this 26 Day of March, 2017 at 9:22:22 AM.** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By VALENTINA WHIPPLE  
Signature of Authorized Representative of the Corporation

Form No. 630  
Revised 09/07

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State of Rhode Island and Providence Plantations  
**Department of State | Office of the Secretary of State**  
**Nellie M. Gorbea**, *Secretary of State*

I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island  
and Providence Plantations, hereby certify that this document, duly executed in  
accordance with the provisions of Title 7 of the General Laws of Rhode Island, as  
amended, has been filed in this office on this day:

March 26, 2017 09:21 AM

A handwritten signature in blue ink, appearing to read "Nellie M. Gorbea". The signature is fluid and cursive.

Nellie M. Gorbea  
*Secretary of State*

