



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

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 R.I. BUSINESS SERVICES DIVISION
 2017 MAY 12 AM 10:15

Annual Report for the year: 2016
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 38379		2. Exact name of the Corporation RC, Inc	
3. Principal Office Address 474 Broadway		City Pawtucket	State R.I
		Zip 02860	
4. NAICS Code 54	6. Brief description of the character of business conducted in Rhode Island Civil and environmental engineering		
5. State of Incorporation R.I.			
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
President Name Robert C. Atwood		Vice-President Name Mark House	
Street Address 14 Lilac St		Street Address 116 Old Mountain Rd.	
City Sharon	State Ma	Zip 02067	City Wakefield
			State RI
			Zip 02879
Secretary Name Robert Atwood		Treasurer Name Mark House	
Street Address Same as above		Street Address Same as above	
City	State	Zip	City
			State
			Zip
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
Director Name Robert Atwood		Director Name Mark House	
Street Address Same as above		Street Address Same as above	
City	State	Zip	City
			State
			Zip
Director Name Lynn Atwood		Director Name	
Street Address 14 Lilac St		Street Address	
City Sharon	State Ma	Zip 02067	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 8,000	CLASS/SERIES CNP
			PAR VALUE 0
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 Robert Atwood, President			Date 4/15/17
Signature of Authorized Representative Robert C. Atwood			

FILED

MAY 12 2017

BY **303531**

A.A. 10:26 A.M.

MAIL TO:
 Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040
 Website: www.sos.ri.gov