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

Annual Report for the year: 2018
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	2. Exact name of the Corporation
000063439	LANPHEAR & SONS, INC.

3. Principal Office Address	City	State	Zip
158 Watch Hill Road	Westerly	RI	02891

4. NAICS Code	6. Brief description of the character of business conducted in Rhode Island
236220	Construction and renovation of buildings.

5. State of Incorporation
Rhode Island

7. List ALL officers (names and addresses) — Check the box to indicate an attachment ☐

President Name	Street Address	City	State	Zip
Timothy S. Lanphear	P.O. Box 3062	Westerly	RI	02891

Vice-President Name	Street Address	City	State	Zip
Timothy S. Lanphear	P.O. Box 3062	Westerly	RI	02891

Secretary Name	Street Address	City	State	Zip
Timothy S. Lanphear	P.O. Box 3062	Westerly	RI	02891

Treasurer Name	Street Address	City	State	Zip
Timothy S. Lanphear	P.O. Box 3062	Westerly	RI	02891

8. List ALL directors (names and addresses) — Check the box to indicate an attachment ☐

Director Name	Street Address	City	State	Zip
Timothy S. Lanphear	P.O. Box 3062	Westerly	RI	02891

Director Name	Street Address	City	State	Zip

9. Shares Authorized — 10. Shares Issued — Check the box to indicate an attachment ☐

This information is currently of record in the Department of State.

Changes require an additional filing.

Number of Shares	Class/Series	Par Value
200	Common	None

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: Timothy S. Lanphear, President

Date: 2/10/18

Signature of Authorized Representative: Timothy Lanphear

SIGN DOCUMENT HERE

FILED
FEB 13 2018
BY 14446

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

FORM 630 - Revised: 10/2017