RI SOS Filing Number: 201859313640 Date: 2/26/2018 4:00:00 PM

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
123268	ADVANCED CIVIL DESIGN, INC.

3. Principal Office Address	City	State	Zip
88 Peeptoad Road	North Scituate	RI	02857

4. NAICS Code	6. Brief description of the character of business conducted in Rhode Island
541330	provide professional engineering services
5 State of Incorporation: Rhode Island	

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

President Name	Vice-President Name
Nicholas J. Piampiano	Curtis S. Ruotolo
Street Address: 88 Peeptoad Road	Street Address: 1 Laura Court
City: No. Scituate, State: RI, Zip: 02857	City: Smithfield, State: RI, Zip: 02917
Secretary Name: Nicholas J. Piampiano	**Treasurer Name:** Curtis S. Ruotolo
Street Address: 88 Peeptoad Road	Street Address: 1 Laura Court
City: No. Scituate, State: RI, Zip: 02857	City: Smithfield, State: RI, Zip: 02917

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

Director Name	Director Name
none	
Street Address	Street Address
City, State, Zip	City, State, Zip
Director Name	Director Name
Street Address	Street Address
City, State, Zip	City, State, Zip

9. Shares Authorized	10. Shares Issued — Check the box to indicate an attachment ☐		
	NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
This information is currently of record in the Department of State.	100	common	$1.00
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	Date
Nicholas J. Piampiano, President	2/19/18

Signature of Authorized Representative

FILED

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

FEB 26 2018
BY

FORM 630 - Revised: 10/2017