



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

Annual Report for the year:  
Corporation

2018

STAMP

FOR  
SECRETARY OF STATE  
USE ONLY

- 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 <b>93371</b>		2. Exact name of the Corporation <b>CONECO ENGINEERS AND SCIENTISTS, INCORPORATED</b>	
3. Principal Office Address <b>4 First Street</b>		City <b>Bridgewater</b>	State <b>MA</b>
		Zip <b>02324</b>	
4. NAICS Code <b>31-33 - Manufacturing</b>	6. Brief description of the character of business conducted in Rhode Island <b>To design, develop, experiment with, manufacture, assemble, install, repair and deal with equipment.</b> <b>339999</b>		
5. State of Incorporation <b>Rhode Island</b>			
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>			
President Name <b>R. Richard Lincoln, Jr.</b>		Vice-President Name <b>R. Richard Lincoln, Jr.</b>	
Street Address <b>4 First Street</b>		Street Address <b>4 First Street</b>	
City <b>Bridgewater</b>	State <b>MA</b>	City <b>Bridgewater</b>	State <b>MA</b>
Zip <b>02324</b>		Zip <b>02324</b>	
Secretary Name <b>R. Richard Lincoln, Jr.</b>		Treasurer Name <b>R. Richard Lincoln, Jr.</b>	
Street Address <b>4 First Street</b>		Street Address <b>4 First Street</b>	
City <b>Bridgewater</b>	State <b>MA</b>	City <b>Bridgewater</b>	State <b>MA</b>
Zip <b>02324</b>		Zip <b>02324</b>	
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>			
Director Name <b>R. Richard Lincoln, Jr.</b>		Director Name <b>None</b>	
Street Address <b>4 First Street</b>		Street Address	
City <b>Bridgewater</b>	State <b>MA</b>	City	State
Zip <b>02324</b>		Zip	
Director Name <b>None</b>		Director Name <b>None</b>	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
9. Shares Authorized This information is currently of record in the Department of State. Changes require an additional filing.		10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>	
		NUMBER OF SHARES	CLASS/SERIES
		200,000	Common
			No Par Value
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. <i>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.</i>			
Name of Authorized Representative <b>R. Richard Lincoln, Jr.</b>		Date <b>2/12/18</b>	
Signature of Authorized Representative 		SIGN DOCUMENT HERE <b>FILED</b>	

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 28 2018

FORM 630 - Revised: 10/2016

BY

17955 05