



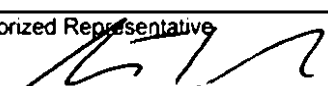
State of Rhode Island and Providence Plantations  
**Department of State - Business Services Division**

**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

**STAMP**

FOR  
 SECRETARY OF STATE  
 USE ONLY

1. Entity ID Number <b>000100792</b>		2. Exact name of the Corporation <b>Commonwealth Land Surveyors, Inc.</b>									
3. Principal Office Address <b>1182 South Main Street, 2nd Floor</b>			City <b>Attleboro</b>	State <b>MA</b>	Zip <b>02703</b>						
4. NAICS Code <b>541370</b>		6. Brief description of the character of business conducted in Rhode Island <b>To conduct, manage and carry on business of land surveyors and biologists and to do surveying work of all types</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>Curt Nunes</b>			Vice-President Name								
Street Address <b>1182 South Main Street, 2nd Floor</b>			Street Address								
City <b>Attleboro</b>	State <b>MA</b>	Zip <b>02703</b>	City	State	Zip						
Secretary Name <b>Curt Nunes</b>			Treasurer Name <b>Curt Nunes</b>								
Street Address <b>1182 South Main Street, 2nd Floor</b>			Street Address <b>1182 South Main Street, 2nd Floor</b>								
City <b>Attleboro</b>	State <b>MA</b>	Zip <b>02852</b>	City <b>Attleboro</b>	State <b>MA</b>	Zip <b>02852</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>Curt Nunes</b>			Director Name								
Street Address <b>1182 South Main Street, 2nd Floor</b>			Street Address								
City <b>Attleboro</b>	State <b>MA</b>	Zip <b>02703</b>	City	State	Zip						
Director Name			Director Name								
Street Address			Street Address								
City	State	Zip	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 <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>								
			<table border="1"> <thead> <tr> <th>NUMBER OF SHARES</th> <th>CLASS/SERIES</th> <th>PAR VALUE</th> </tr> </thead> <tbody> <tr> <td>1000</td> <td></td> <td>0.00</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table>			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	1000		0.00
NUMBER OF SHARES	CLASS/SERIES	PAR VALUE									
1000		0.00									
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.											
<b>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.</b>											
Name of Authorized Representative <b>Curt Nunes</b>					Date <b>12/20/17</b>						
Signature of Authorized Representative  <span style="float: right;">SIGN DOCUMENT HERE</span>											

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

**FILED**

MAR 01 2018

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FORM 630 - Revised: 10/2017