



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

FILED

Annual Report for the year: 2019
Corporation

JAN 16 2019

- Filing period: January 1 - March 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by April 1.

BY 12120
JA

1. Entity ID Number 000074631		2. Exact name of the Corporation Warzycha Construction Company, Inc.			
3. Principal Office Address 51 Enfield Street			City Pawtucket	State RI	Zip 02861
4. NAICS Code 212321		6. Brief description of the character of business conducted in Rhode Island Construction			
5. State of Incorporation Rhode Island					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Joseph W. Warzycha, Jr.			Vice-President Name Joseph W. Warzycha, Jr.		
Street Address 51 Enfield Street			Street Address 51 Enfield Street		
City Pawtucket	State RI	Zip 02861	City Pawtucket	State RI	Zip 02861
Secretary Name Lorraine C. Slaney			Treasurer Name Joseph W. Warzycha, Jr.		
Street Address 23 Royal Avenue			Street Address 51 Enfield Street		
City Providence	State RI	Zip 02904	City Pawtucket	State RI	Zip 02861
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name Joseph W. Warzycha, Jr.			Director Name		
Street Address 51 Enfield Street			Street Address		
City Pawtucket	State RI	Zip 02861	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 <input type="checkbox"/>		
This information is currently of record in the Department of State. Changes require an additional filing.			NUMBER OF SHARES		CLASS/SERIES
			600		Common
					PAR VALUE
					No Par
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 Lorraine C. Slaney					Date January 2, 2019
Signature of Authorized Representative SIGN HERE					

MAIL TO:
 Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2600
 Phone: (401) 222-3040
 Website: www.sos.ri.gov