RI SOS Filing Number: 201985855810 Date: 2/1/2019 4:00:00 PM

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: 2019

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

1. Entity ID Number	2. Exact name of the Corporation
13651	**Nadeau Corporation, Construction Development & Engineering**

3. Principal Office Address	City	State	Zip
727 Wshington St.	**South Attleboro**	**MA**	**02703**

4. NAICS Code	6. Brief description of the character of business conducted in Rhode Island
236118	**General Building and Engineers**
5. State of Incorporation: **RI**	

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

President Name	Vice-President Name
Ernest Nadeau	
Street Address: **7 Scott Drive**	Street Address:
City: **Lincoln** State: **RI** Zip: **02865**	City: State: Zip:
Secretary Name	Treasurer Name
Street Address	Street Address
City: State: Zip:	City: State: Zip:

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

Director Name	Director Name
Ernest Nadeau	
Street Address: **7 Scott Drive**	Street Address:
City: **Lincoln** State: **RI** Zip: **02865**	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 ☐		
This information is currently of record in the Department of State. **Changes require an additional filing.**	NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
	114	**Common**	**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.

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
Ernest Nadeau	1.30.19
Signature of Authorized Representative: SIGN DOCUMENT HERE	**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 01 2019
BY 1847 DS

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