(III)

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 \$25.0		• •		.:-	_	· · · · · · · · · · · · · · · · · · ·	
1. Entity ID Number <b>20643</b>	2. Exact name of the Corporation  Poly/Sperse Corp.						
3. Principal Office Address			City State Zip			Zip	
250 Narragansett Park Drive			East Provid	rovidence		02916	
4. NAICS Code	6. Brief description of the character of business conducted in Rhode Island						
325130	Making pigment color dispersions						
5. State of Incorporation RI							
7. List ALL officers (names and	addresses)		-		the box to in	idicate an attachment 🗵	
President Name Richard F. Bac	Vice-President Name Richard E. Bache						
Street Address 90 Hillside Aven	Street Address 90 Hillside Avenue						
City Rehoboth	State MA	<sup>Zip</sup> 02769	City Rehoboth		State MA	<sup>Zıp</sup> <b>02769</b>	
Secretary Name Richard F. Bache			Treasurer Name Muriel Bache				
Street Address 90 Hillside Avenue			Street Address 90 Hillside Avenue				
City Rehoboth	State MA	<sup>Zip</sup> 02769	City Rehoboth		State MA	<sup>Zip</sup> <b>02769</b>	
8. List ALL directors (names an	d addresses)			Check	the box to in	ndicate an attachment 🔼	
Director Name Richard F. Bache			Director Name	Director Name Richard E. Bache			
Street Address 90 HillsIde Avenue			Street Address 1 Carriage Lane				
City Rehoboth	State MA	<sup>Zip</sup> 02769	City East Providence		State RI	Z <sub>IP</sub> 02916	
Director Name John S. Bache			Director Name William R. Bache				
Street Address P.O. Box 372	Street Address P.O. Box 1087						
City North Dighton	State MA	<sup>Zip</sup> 02764	City Lakeville		State MA	Zip <b>02347</b>	
9. Shares Authorized		10. Shares Iss	ued			ndicate an attachment 🔲	
This Information is currently of record in the Department of State.		NUMBER OF SHARES				No Par Value	
Changes require an additional fil	ing.						
11. This report must be execute trustee, this report must be exe	ed on behalf of the	corporation by an a	authorized repres	sentative. If the corporate	oration is in t	he hands of a receiver or	
Under penalty of perjury, I de	clare and affirm ti	hat I have examin	ed this report, i	ncluding any accor	npanying s	chedules and	
statements, and that all statements contained herein are true and co Name of Authonzed Representative					Date	. 0.	
Richard F. Bache, President		2-1-19					
Signature of Authorized Repres		DIGN DO	CUMENT HERE				

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** 

FEB 1 3 2019 FORM 630 - Revisod: 10/2017

### **2019 ANNUAL REPORT CONTINUED**

# Poly/Sperse Corp.

# Corporate ID No. 20643

#### Vice Presidents Continued:

JOHN S. BACHE Vice President

> 115 Upton Avenue Providence, RI 02906

WILLIAM R. BACHE Vice President

P.O. Box 1087

Lakeville, MA 02347

### Directors continued:

MURIEL BACHE Director

> 90 Hillside Avenue Rehoboth, MA 02769

> > **FILED**

FEB 13 2019 PS 4336 PS IN 20043