



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

FILED

FEB 28 2019

BY

26700

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.

1. Entity ID Number 16469		2. Exact name of the Corporation Henderson Electric, Inc.			
3. Principal Office Address 92 Pleasant Street			City Pawtucket	State RI	Zip 02860
4. NAICS Code 238210		6. Brief description of the character of business conducted in Rhode Island Render electrical & related services			
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 Thomas Henderson			Vice-President Name Michael Szczepanek		
Street Address 26 Woodbine Lane			Street Address 19 Ridge Road		
City Exeter	State RI	Zip 02822	City South Carver	State MA	Zip 02366
Secretary Name Thomas Henderson			Treasurer Name Thomas Henderson		
Street Address 26 Woodbine Lane			Street Address 26 Woodbine Lane		
City Exeter	State RI	Zip 02822	City Exeter	State RI	Zip 02822
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name Thomas Henderson			Director Name		
Street Address 26 Woodbine Lane			Street Address		
City Exeter	State RI	Zip 02822	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		PAR VALUE
			100	Common	No
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 Thomas Henderson, President				Date 2-11-19	
Signature of Authorized Representative 					

MAIL TO:
 Division of Business Services
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 Website: www.sos.ri.gov