



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.

FILED

MAR 20 2019

BY

5317

1. Entity ID Number 63717		2. Exact name of the Corporation Halco, Inc			
3. Principal Office Address 19 Leeshore Lane			City Tiverton	State RI	Zip 02878
4. NAICS Code 813910		6. Brief description of the character of business conducted in Rhode Island Collect proceeds from sale of business			
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 Robert Lanz			Vice-President Name		
Street Address 19 Leeshore Lane			Street Address		
City Tiverton	State RI	Zip 02878	City	State	Zip
Secretary Name Glen Harper			Treasurer Name		
Street Address 20330 Chapel Trace			Street Address		
City Estero	State FL	Zip 33928	City	State	Zip
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name Robert Lanz			Director Name Glen Harper		
Street Address 19 Leeshore Lane			Street Address 20330 Chapel Trace		
City Tiverton	State RI	Zip 02878	City Estero	State FL	Zip 33928
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		PAR VALUE
			1000	Common	No Par Value
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 Glen Harper, Chairman + Secretary					Date 3/15/19
Signature of Authorized Representative <i>Glen Harper</i>					