

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: 2018 Corporation

→ Filing period: January 1 - March 1 → Filing Fee: \$50.00

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PAIS: 5-	,	
6 PM 12. 5		

1. Entity ID Number 000083602 3. Principal Office Address			*						
3 Principal Office Address	Diakesie	2. Exact name of the Corporation Blakeslee Arpaia Chapman, Inc.							
Principal Office Address North Branford Road			City Branford		State CT	Zip 06405			
4. NAICS Code	6. Brief descr	ription of the charac	cter of business	conducted in Rhoo	de Island	. I			
237990.	Marine, hea	Marine, heavy, highway and utitlity construction. Rigging and millwright services							
5. State of Incorporation		,							
Connecticut									
7. List ALL officers (names ar	nd addresses)			Che	eck the box to ind	icate an attachment. I			
President Name			Vice-Presider	nt Name David R. (Chapman (Senio	r Vice President)			
Streel Address			Street Address 19 Jenda Way						
City	State	^{Zıp} 06443	City Madison		State CT	Zip 06443			
Secretary Name Keith S. Doly:	ne Keith S. Dolyak			Treasurer Name					
reel Address 2 Evergreen Lane			Street Address						
Cily Oxford	State CT	^{Zıp} 06478	City		State	Zip			
8. List ALL directors (names a	and addresses)		I		eck the box to ind	icate an attachment [
Director Name Keith S. Dolya	k		Director Nam	^e David R. Chapm	an				
Street Address 2 Evergreen Lane			Street Address 19 Jenda Way						
City Oxford	State CT	Zıp 06478	City Madiso	n	State CT	Zip 06443			
Director Name	•	•	Director Nam	е	•				
Street Address			Street Addres	ss					
City	State	Zip	City		State	Zip			
9 Shares Authorized 10. Shares Iss									
This information is currently of record in the Department of State.			NUMBER OF SHARES		RIES	PAR VALUE			
Changes require an additional filing.		20,000	CWP			\$1.00			
11. This report must be execu	ited on hebalf of the	corporation by an	authorized repre	sentative. If the co	rnoration is in the	hands of a receiver			
trustee, this report must be execu						, harios or a receiver			
Under penalty of perjury, I o statements, and that all sta				including any acc	companying sch	edules and			
Name of Authorized Represe	IN COLLECT		Date						
Keith S. Dolyak, Vice Presid	FILE	D	5/1/19						
Signature of Authorized Repr	esentative ///	28 M 00	MAY 0-6	201 0					
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Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov BY C'1611V A.A. 1'. 03 P.M. FORM 630 - Revised: 10/2017

BLAKESLEE ARPAIA CHAPMAN, INC. 200 NORTH BRANFORD BRANFORD, CT 06405

Corporate ID # 000083602

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2018

FORM 630, REV. 10/2017

Attachment: Names and Addresses of Officers

VICE PRESIDENT FINANCE

KEITH S. DOLYAK

2 EVERGREEN LANE

OXFORD, CT 06478

VICE PRESIDENT

HEAVY DIVISION

MARK J. DELVECCHIO

12 JENNIFER LANE

KILLINGWORTH, CT 06417

VICE PRESIDENT

ESTIMATING

CARL S. ARPAIA

17 PINE STREET DRIVE

BRANFORD, CT 06405

VICE PRESIDENT

MARINE DIVISION

MICHAEL J. OSWIECIMSKI

10 LONGFELLOW ROAD

SHELTON, CT 06484

VICE PRESIDENT

UTILITY DIVISION

MARSHALL T. RENKOWSKY

14 CEDAR HILL ROAD

SHELTON, CT 06484