



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

FILED

Annual Report for the year: 2020
Corporation

- Filing period: January 1 - March 1
→ Filing Fee: \$50.00
→ Penalty: Additional \$25.00 fee if form is not filed by April 1.

FEB 04 2020

BY

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BY 21171 MS

1. Entity ID Number <u>58448</u>		2. Exact name of the Corporation TSCO, INC.			
3. Principal Office Address 735 East Road			City Scituate	State RI	Zip 02857
4. NAICS Code 23	6. Brief description of the character of business conducted in Rhode Island Manufacture of trusses.				
5. State of Incorporation Rhode Island					
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐					
President Name Richard K. Duckworth, Jr.			Vice-President Name Lorraine D. Duckworth		
Street Address 735 East Road			Street Address 735 East Road		
City Scituate	State RI	Zip 02857	City Scituate	State RI	Zip 02857
Secretary Name Richard K. Duckworth, Jr.			Treasurer Name Lorraine D. Duckworth		
Street Address 735 East Road			Street Address 735 East Road		
City Scituate	State RI	Zip 02857	City Scituate	State RI	Zip 02857
8. List ALL directors (names and addresses) Check the box to indicate an attachment ☐					
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	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		
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 Richard K. Duckworth, Jr.					Date 1/28/2020
Signature of Authorized Representative 					SIGN DOCUMENT HERE

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