



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

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R.I. DEPT OF STATE
BUS SVCS DIV

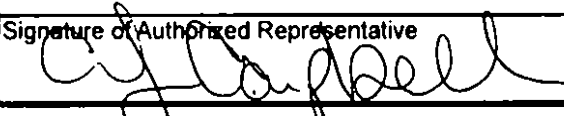
2020 MAR 13 2:20

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.

1. Entity ID Number 959424		2. Exact name of the Corporation C & G Casting of RI, Inc.			
3. Principal Office Address PO Box 2826			City Pawtucket	State RI	Zip 02861
4. NAICS Code 448310		6. Brief description of the character of business conducted in Rhode Island Jewelry casting and any other lawful 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 Carolyn A. Campbell			Vice-President Name Lisa K. Goozey		
Street Address 6 Friar Tuck Lane, Unit 51			Street Address 33 Shippee Schoolhouse Road		
City Coventry	State RI	Zip 02816	City Foster	State RI	Zip 02825
Secretary Name Lisa K. Goozey			Treasurer Name Carolyn A. Campbell		
Street Address 33 Shippee Schoolhouse Road			Street Address 6 Friar Tuck Lane, Unit 51		
City Foster	State RI	Zip 02825	City Coventry	State RI	Zip 02816
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name Carolyn A. Campbell			Director Name Lisa K. Goozey		
Street Address 6 Friar Tuck Lane, Unit 51			Street Address 33 Shippee Schoolhouse Road		
City Coventry	State RI	Zip 02816	City Foster	State RI	Zip 02825
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		
			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 Carolyn A. Campbell, President					Date 2/28/2020
Signature of Authorized Representative 					SIGN DOCUMENT HERE FILED

MAR 13 2020

BY CA QGJFC
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