



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

FILED

JUL 08 2020

6606

Annual Report for the year: 2020
 Non-Profit Corporation

- Filing period: June 1 - June 30
- Filing Fee: \$20.00
- Penalty: Additional \$25.00 fee if form is not filed by July 30.

1. Entity ID Number 29035		2. Exact name of the Corporation Rhode Island Chapter Associated General Contractors of America, Inc.			
3. State of Incorporation RI		5. Brief description of the character of business conducted in Rhode Island Industry Trade Association			
4. NAICS Code 238390					
6. Principal Office Address 188 Valley St., Ste. 211		City Providence	State RI	Zip 02909	
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name John Sinnott			Vice-President Name Bruce Jannuccillo		
Street Address 7 Jackson Walkway			Street Address 70 Calverley St		
City Providence	State RI	Zip 02903	City Providence	State RI	Zip 02908
Secretary Name David Ducharme			Treasurer Name Edward W. Burman, Jr.		
Street Address One Harry St.			Street Address 53 Vermont Ave		
City CrANston	State RI	Zip 02907	City Warwick	State RI	Zip 02888
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment <input type="checkbox"/>					
Director Name John Sinnott			Director Name Bruce Jannuccillo		
Street Address 7 Jackson Walkway			Street Address 70 Calverley St		
City Providence	State RI	Zip 02903	City Providence	State RI	Zip 02908
Director Name David Ducharme			Director Name Edward W. Burman, Jr.		
Street Address One Harry Street			Street Address 53 Vermont Ave		
City CrANston	State RI	Zip 02907	City Warwick	State RI	Zip 02888
9. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641.					
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.					
<small>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee</small>					
Name of Officer/Authorized Representative Edward W. Burman, Jr. Treasurer					Date 7/2/20
Signature of Officer/Authorized Representative <i>[Signature]</i>					

SIGN DOCUMENT HERE

MAIL TO:
 Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040
 Website: www.sos.ri.gov