



**State of Rhode Island  
Office of the Secretary of State**

Fee: \$50.00

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

**Business Corporation  
Annual Report**

Filing Period: January 1 - March 1

*In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501 (c&d)) is subject to a penalty fee of \$25.00.*

**ANNUAL REPORT YEAR:** 2021

**1. Corporate ID No.** 000031666

**2. Name of Corporation** C. A. Pretzer Associates, Inc.

**3. Street Address Principal Business Office:**

No. and Street: 123 DYER ST  
STE 135

City or Town: PROVIDENCE State: RI Zip: 02903-3907 Country: USA

**4. Business Phone No.**

401-461-9450

**5. State of Incorporation**

State: RI

**ARTICLE III**

Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes [here](#). More information on [NAICS](#) can be found online.

541330

**6. Brief Description of the Character of Business Conducted in Rhode Island**

PROVIDING SERVICES AS AN ENGINEER AND CONSULTANT.

**7. Names and Addresses of the Officers and Directors:**

**All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete.**

Title	Individual Name	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
TREASURER	THOMAS GRAFE	10 SETTLERS WAY

		SCITUATE, RI 02857 USA
SECRETARY	SAMUEL D. ZURIER	123 DYER ST, STE 135 PROVIDENCE, RI 02903 USA
PRESIDENT	MICHAEL J GRAFE	382 WEAVER HILL ROAD WEST GREENWICH, RI 02817- USA
VICE PRESIDENT	THOMAS GRAFE	10 SETTLERS WAY SCITUATE, RI 02857 USA
DIRECTOR	MICHAEL J. GRAFE	382 WEAVER HILL ROAD WEST GREENWICH, RI 02817 USA
DIRECTOR	THOMAS GRAFE	10 SETTLERS WAY SCITUATE, RI 02857 USA

**8. Shares Authorized and Issued**

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares <i>Number of Shares</i>	Total Issued and Outstanding <i>Num of Shares</i>
CNP		\$0.0000	2,000.00	100

**9. 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.**

**Signed this 7 Day of January, 2021 at 11:14:36 AM.** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By SAMUEL ZURIER  
Signature of Authorized Representative of the Corporation

Form No. 630  
Revised 09/07

© 2007 - 2021 State of Rhode Island  
All Rights Reserved