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State of Rhode Island Department of State - Business Services Division Annual Report for the year: 2021						. DEPAND BUS TAND	
Annual Report for the Corporation	<u> </u>						
 → Filing period: January → Filing Fee: \$50.00 → Penalty: Additional \$25 				ED STATE D 3: 2			
Entity ID Number		2. Exact name of the Corporation					
000164588	1	Waterline Industries Corporation					
3. Principal Office Address	<u> </u>		City		State	Zip	
7 London Lanc			Seabrook		NH	03874	
4. NAICS Code	6. Brief descr	6. Brief description of the character of business conducted in Rhode Isla					
237110 5. State of Incorporation NH	General Con	General Construction - Water and Wastewater Treatment Plants, Pumping Stations, and Upgrades					
7. List ALL officers (names ar	nd addresses)			Che	ck the box to in	ndicate an attachment 🗷	
President Name Michael A. Girard			Vice-President Name Brian Shechan				
reet Address 154 High Street			Street Address 92 Old Amesbury Line RD				
City Stratham	State NH	^{2ip} 03885	City Haverhi		State MA	Zip 01830	
Secretary Name Alicia Gilmore-Mclaughlin			Treasurer Name Maria M Dumke				
Street Address 242 Exeter Road			Street Address 21 Montilla Place				
City Hampton	State NH	^{Zip} 03842	City Palm C	oast	State FL	Zip 32137	
8. List ALL directors (names of	and addresses)		Tay	Che	ck the box to in	ndicate an attachment 🗷	
Director Name Gina Haydock	Director Name Harry Fraser						
Street Address 400 Hobbs Farm Road			Street Address PO Box 6356				
City Wells	State ME	Zip 04090	City China V	/illage	State ME	Zip 04926	
Director Name Maria Dumke			Director Name Ralph Dumke				
Street Address 21 Montilla Place			Street Address 21 Montilla Place				
City Palm Coast	State FL	Zip 32137	City Palm C	0351	State FI.	^{Žip} 32137	
9. Shares Authorized		10. Shares Iss				ndicate an attachment [Z	
This information is currently of record in the Department of State. Changes require an additional filing.		NUMBER OF SHARES		CNP		PAR VALUE	
11. This report must be executrustee, this report must be e					rporation is in the	he hands of a receiver or	
Under penalty of perjury, I statements, and that all sta	declare and affirm t tements contained	hat I have examin	ed this report,			hedules and	
Name of Authorized Representative Giná Haydock				Date 2/16/2021			
Signature of Authorized Repr	esentative						
Littard	erh					EU_ED	

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Websito: www.sos.ri.gov

FEB 1 7 2021 FORM 630 - Revised: 08/2020



Additional Officer listed below for Section Seven:

Vice President: Jeffrey Zitzkat

Street Address: 49 Center Avenue

City: Plymouth

State: MA

Zip: 02361

CEO: Ralph Dumke

Street Address: 21 Montilla Place

City: Palm Coast

State: FL

Zip: 32137

Additional Director listed below for Section Eight:

Director: Michael A. Girard

Street Address: 154 High Street

City: Stratham

State: NH

Zip: 03885