RI SOS Filing Number: 202193420300 Date: 3/1/2021 4:00:00 PM



State of Rhode Island

## **Department of State - Business Services Division**

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Annual Report for the year: 2021

Corporation

→ Filing period: January 1 - March 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by April 1.

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1. Entity ID Number	2. Exact name of the Corporation							
93371	CONECO ENGINEERS AND SCIENTISTS, INCORPORATED							
3. Principal Office Address		<u>,</u>	City		State	Zıp		
4 First Street			Bridgewater		MA	02324		
4. NAICS Code	6 Brief descri	intion of the charac			sland			
31-33 - Manufacturing	6. Brief description of the character of business conducted in Rhode Island  To design, develop, experiment with, manufacture, assemble, install, repair and deal with equipment.							
<b>.</b>	- To design, de	velop, experiment	· ····································	ire, assemble, morali	, ropun unu			
5. State of Incorporation RI								
	<u> </u>							
7. List ALL officers (names and ad	idresses)	<u> </u>	Vice-President	Check	the box to it	ndicate an attachment 🔲		
President Name R. Richard Lincoln, Jr.			Vice-President Name R. Richard Lincoln, Jr.					
Street Address 4 First Street			Street Address 4 First Street					
City Bridgewater	State MA	Zip 02324	City Bridgewater		State MA	Zip 02324		
Secretary Name R. Richard Lincoln, Jr.			Treasurer Name R. Richard Lincoln, Jr.					
Street Address 4 First Street		Street Address 4 First Street						
City Bridgewater	State MA	Zip <sub>02324</sub>	City Bridgewa	ater	State MA	Zip 02324		
8. List ALL directors (names and	addresses)			Check	the box to i	ndicate an attachment 🔲		
Director Name R. Richard Lincoln,	Jr.		Director Name	None				
	<del></del>		Street Address	<u></u>				
Street Address 4 First Street			00017.1001					
City Bridgewater	State MA	Zip <sub>02324</sub>	City		State	Zip		
Director Name None			Director Name None					
Street Address			Street Address					
0.0007.007033			0.000					
City	State	Zip	City		State	Žiμ		
9. Shares Authorized		10. Shares Iss				ndicate an attachment PAR VALUE		
This Information is currently of rec Department of State.	<b>I</b>		)F_SHARES	CLASS/SERIE	:S	1		
•		200,000		Common		No Par Value		
Changes require an additional filing	9.							
11. This report must be executed	on behalf of the	corporation by an	authorized repres	lsentative. If the corp	oration is in	the hands of a receiver or		
trustee, this report must be execu	ited on behalf of	the corporation by	the receiver or tr	rustee.				
Under penalty of perjury, I decl statements, and that all statem				ncluding any acco	mpanying s	chedules and		
Name of Authorized Representati		nerem are une ar	TO CONTECT.		Date	/		
R. Richard Lincoln, Jr.				2/18/21				
Signature of Authorized Represer	ntative	2				,		

MAIL TO:

**Division of Business Services** 

148 W. River Street, Providence, Rhode Island 02904-2615

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