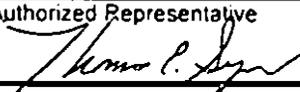




State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2022
 Corporation

- Filing period: February 1 - May 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by May 31.

1. Entity ID Number 001662188		2. Exact name of the Corporation Environmental Strategies & Management, Inc.			
3. Principal Office Address 273 West Main Street			City Norton	State MA	Zip 02766
4. NAICS Code 541260		6. Brief description of the character of business conducted in Rhode Island Environmental Consulting and Engineering Services			
5. State of Incorporation MA					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Thomas E. Sylvia			Vice-President Name N/A		
Street Address 9 Gull Cottage Lane			Street Address		
City Surry	State ME	Zip 04684	City	State	Zip
Secretary Name Douglas A. Heely			Treasurer Name Douglas A. Heely		
Street Address 5 Mann Street			Street Address 5 Mann Street		
City Medway	State MA	Zip 02053	City Medway	State MA	Zip 02053
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name Thomas E. Sylvia			Director Name N/A		
Street Address 9 Gull Cottage Lane			Street Address		
City Surry	State ME	Zip 04684	City	State	Zip
Director Name Douglas A. Heely			Director Name N/A		
Street Address 5 Mann Street			Street Address		
City Medway	State MA	Zip 02053	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
		1,000		Common	0
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 Thomas E. Sylvia				Date March 1, 2022	
Signature of Authorized Representative 				FILED	

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

MAR 23 2022
