



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

Annual Report for the year: **2023**
Corporation

- Filing period: January 1 - March 1
→ Filing Fee: \$50.00
→ Penalty: Additional \$25.00 fee if form is not filed by April 1.

FILED

FEB 21 2023

BY

100795
QA

1. Entity ID Number 000158206		2. Exact name of the Corporation PM Construction Co., Inc.			
3. Principal Office Address 19 Industrial Park Road		City Saco		State ME	Zip 04072
4. NAICS Code 237990		6. Brief description of the character of business conducted in Rhode Island Construction services and related services.			
5. State of Incorporation Maine					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name William S. Nason			Vice-President Name George LaPlume Jr.		
Street Address 19 Industrial Park Road			Street Address 19 Industrial Park Road		
City Saco	State ME	Zip 04072	City Saco	State ME	Zip 04072
Secretary Name Peter Schroeter			Treasurer Name George G. Deely		
Street Address 19 Industrial Park Road			Street Address 19 Industrial Park Road		
City Saco	State ME	Zip 04072	City Saco	State ME	Zip 04072
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name No directors			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized 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.		10. Shares Issued		CLASS/SERIES	
		NUMBER OF SHARES	PAR VALUE		
		150	Common	No par value	
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 William S. Nason, President				Date 2/7/23	
Signature of Authorized Representative 					

MAIL TO:
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