RI SOS Filing Number: 202332427900 Date: 4/5/2023 4:00:00 PM

State of Rhode Island Department of	State - Busine	ess Services (Division	٠	KC/II	ED	
Annual Report for the		FILED STAMP					
Annual Report for the year: Corporation → Filing period: February 1 - May 1 → Filing Fee: \$50.00 → Penalty: Additional \$25.00 fee if form is not filed by May 31.			APR 05 2023 TANK MARKED BY 103 (02 CONT.) TARK				
1. Entity ID Number 000064973	2. Exact nam	2. Exact name of the Corporation Luzier Construction Corporation					
3. Principal Office Address 10 Classic Court			City Cranston	·	State RI	Zip 02921	
4. NAICS Code 236116 5. State of Incorporation RI		iption of the characteonstruction.	ter of business co	onducted in Rhode	e Island		
7. List ALL officers (names and	d addresses)			Chec	ck the box to i	ndicate an attachment E	
President Name Dennis M. Luzier			Vice-President Name Elizabeth A. Luzier				
Street Address 10 Classic Court			Street Address 10 Classic Court				
City Cranston	State RI	^{Zip} 02921	City Cranste		State RI	^{Zip} 02921	
Secretary Name Dennis M. Luzier			Treasurer Name Elizabeth A. Luzier				
Street Address 10 Classic Court			Street Address 10 Classic Court				
^{City} Cranston	State RI	^{Z_{ip}} 02921	City Cranston		State RI	^{Žip} 02921	
8. List ALL directors (names ar Director Name	nd addresses)		D rector Name		ck the box to	ndicate an attachment [
Street Address			Street Address				
City	State	Zip	City		State	State Z _I p	
Director Name			Director Name				
Street Address			Street Address				
City	State	Zıp	City	·	State	Zip	
9. Shares Authorized This Information is currently of record in the					Check the box to indicate an attachment SISERIES PAR VALUE		
Department of State. Changes require an additional filing.		100		CLASS/SERIES		no par value	
11. This report must be execut trustee, this report must be execut Under penalty of perjury, I distatements, and that all state Name of Authorized Representation.	ted on behalf of the ecuted on behalf of eclare and affirm to ements contained	the corporation by that I have examin	the receiver or tr ed this report, in	ustee.	ompanying s		
Signature of Authorized Repre	esentative		-				

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

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