



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2024

Corporation

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

FILED STAMP

FEB 05 2024

1. Entity ID Number 35239		2. Exact name of the Corporation Nolin Electric, Inc.			
3. Principal Office Address 82 Stamp Farm Road			City Cranston	State RI	Zip 02921
4. NAICS Code 238210		6. Brief description of the character of business conducted in Rhode Island Electrical Contracting			
5. State of Incorporation Rhode Island					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Jeffrey Nolin			Vice-President Name Jacqueline Nolin		
Street Address 160 John Potter Road			Street Address 53 Battey Meeting House Road		
City West Greenwich	State RI	Zip 02817	City North Scituate	State RI	Zip 02857
Secretary Name Jeffrey Nolin			Treasurer Name Jeffrey Nolin		
Street Address 160 John Potter Road			Street Address 160 John Potter Road		
City West Greenwich	State RI	Zip 02817	City West Greenwich	State RI	Zip 02817
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name Jacqueline Nolin			Director Name Jeffrey Nolin		
Street Address 53 Battey Meeting House Road			Street Address 160 John Potter Road		
City North Scituate	State RI	Zip 02857	City West Greenwich	State RI	Zip 02817
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	
		100	Common	No Par	
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. <i>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.</i>					
Name of Authorized Representative Jeffrey Nolin				Date 2-1-2024	
Signature of Authorized Representative 					

MAIL TO:
 Division of Business Services
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 Phone: (401) 222-3040
 Website: www.sos.ri.gov