



**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
FEB 28 2024
BY [Signature] 24792

1. Entity ID Number 118504	2. Exact name of the Corporation FRANK ZAINO & ASSOCIATES, INC.
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3. Principal Office Address P.O. Box 57, 183 Providence New London Tpke	City North Stonington	State CT	Zip 06359
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4. NAICS Code 531390	6. Brief description of the character of business conducted in Rhode Island Construction project management and all other lawful purposes.
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 Frank A. Zaino, Jr.			Vice-President Name Frank A. Zaino, Jr.		
Street Address PO Box 57, 183 Prov. New London Tpke			Street Address PO Box 57, 183 Prov. New London Tpl		
City North Stonington	State CT	Zip 06359	City North Stonington	State CT	Zip 06359
Secretary Name Frank A. Zaino, Jr.			Treasurer Name Frank A. Zaino, Jr.		
Street Address PO Box 57, 183 Prov. New London Tpke			Street Address PO Box 57, 183 Prov. New London Tp		
City North Stonington	State CT	Zip 06359	City North Stonington	State CT	Zip 06359

8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name n/a			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 This information is currently of record in the Department of State. Changes require an additional filing.	10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>		
	NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
	100	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 Frank A. Zaino Jr., President	Date 2/19/24
Signature of Authorized Representative <u>[Signature]</u>	