



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

APR 08 2024

BY

1. Entity ID Number 93371		2. Exact name of the Corporation CONECO ENGINEERS AND SCIENTISTS, INCORPORATED			
3. Principal Office Address 4 First Street			City Bridgewater	State MA	Zip 02324
4. NAICS Code 31-33 Manufacturing	6. Brief description of the character of business conducted in Rhode Island To design, develop, experiment with, manufacture, assemble, install, repair and deal with equipment.				
5. State of Incorporation RI					
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name R. Richard Lincoln, Jr.			Vice-President Name R. Richard Lincoln, Jr.		
Street Address 4 First Street			Street Address 4 First Street		
City Bridgewater	State MA	Zip 02324	City Bridgewater	State MA	Zip 02324
Secretary Name R. Richard Lincoln, Jr.			Treasurer Name R. Richard Lincoln, Jr.		
Street Address 4 First Street			Street Address 4 First Street		
City Bridgewater	State MA	Zip 02324	City Bridgewater	State MA	Zip 02324
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name R. Richard Lincoln, Jr.			Director Name		
Street Address 4 First Street			Street Address		
City Bridgewater	State MA	Zip 02324	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized			10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>		
This information is currently of record in the Department of State.  Changes require an additional filing.			NUMBER OF SHARES		
			CLASS/SERIES		PAR VALUE
			200,000	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. <b>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.</b>					
Name of Authorized Representative R. Richard Lincoln, Jr.				Date 3/21/24	
Signature of Authorized Representative 					

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