



State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2024
Corporation _____

MAY 01 2024
11037 *OR*

- Filing period: February 1 - May 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by May 31.

1. Entity ID Number 150017	2. Exact name of the Corporation RYGRAM CONSTRUCTION CO., INC.
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3. Principal Office Address 597 State Road	City Dartmouth	State MA	Zip 02747
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4. NAICS Code 238990	6. Brief description of the character of business conducted in Rhode Island Installation and maintenance of swimming pools & spas and repairing same.
5. State of Incorporation Massachusetts	

7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Paul S. Flanagan			Vice-President Name None		
Street Address 32 Wilson Street			Street Address N/A		
City South Dartmouth	State MA	Zip 02748	City	State	Zip
Secretary Name Paul S. Flanagan			Treasurer Name Bernice M. Flanagan		
Street Address 32 Wilson Street			Street Address 32 Wilson Street		
City South Dartmouth	State MA	Zip 02748	City South Dartmouth	State MA	Zip 02748

8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name Paul S. Flanagan			Director Name Bernice M. Flanagan		
Street Address 32 Wilson Street			Street Address 32 Wilson Street		
City South Dartmouth	State MA	Zip 02748	City South Dartmouth	State MA	Zip 02748
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
	275,000	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.

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 Paul S. Flanagan	Date March 30, 2024
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Signature of Authorized Representative