



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.

REC'D RIDOS BSD  
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1. Entity ID Number <b>001755355</b>		2. Exact name of the Corporation <b>Durgin Electric, Inc.</b>			
3. Principal Office Address <b>2695 Patterson Rd., Suite 2-293</b>		City <b>Grand Junction</b>		State <b>CO</b>	Zip <b>81506</b>
4. NAICS Code <b>238210</b>		6. Brief description of the character of business conducted in Rhode Island <b>TO BE ABLE TO DO ELECTRICAL CONTRACTING WORK IN THE STATE OF RHODE ISLAND.</b>			
5. State of Incorporation <b>Colorado</b>					
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name <b>STEPHEN W DURGIN</b>			Vice-President Name		
Street Address <b>2695 Patterson Rd., Suite 2-293</b>			Street Address		
City <b>Grand Junction</b>	State <b>CO</b>	Zip <b>81506</b>	City	State	Zip
Secretary Name			Treasurer Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name			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 <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.		10. Shares Issued		CLASS-SERIES	
		NUMBER OF SHARES			PAR VALUE
		<b>8,000</b>	<b>CWP</b>	<b>0.01</b>	
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 <b>Stephen W Durgin</b>					Date <b>8-1-2024</b>
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

WES FILED 1210

FORM 630- Revised 12/2023

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BY 30532

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