

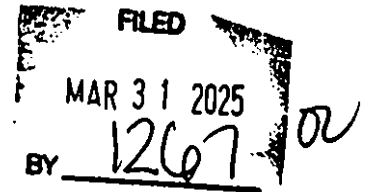


State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2025

Corporation

- 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 RYCRAM CONSTRUCTION CO., INC.			
3. Principal Office Address 210 Goddard Row		City Newport		State RI	Zip 02840
4. NAICS Code 238990		6. Brief description of the character of business conducted in Rhode Island Installation & Maintenance of swimming pools @ Spas			
5. State of Incorporation Massachusetts					
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐					
President Name Paul S. Flanagan			Vice-President Name None		
Street Address 32 Wilson Street			Street Address N/A		
City Dartmouth	State MA	Zip 02748	City	State	Zip
Secretary Name Paul S. Flanagan			Treasurer Name		
Street Address 32 Wilson Street			Street Address		
City Dartmouth	State MA	Zip 02748	City	State	Zip
8. List ALL directors (names and addresses) Check the box to indicate an attachment ☐					
Director Name Paul S Flanagan			Director Name Bernice M. Flanagan		
Street Address 32 Wilson Street			Street Address 32 Wilson Street		
City Dartmouth	State MA	Zip 02747	City Dartmouth	State MA	Zip 02747
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized Check the box to indicate an attachment ☐					
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 ☐			
NUMBER OF SHARES		CLASS/SERIES		PAR VALUE	
275,000		Common		NoPar	
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 27, 2025	
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