



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.

FILED
APR 04 2025
BY *[Signature]*

1. Entity ID Number 952		2. Exact name of the Corporation American Welding Company, Inc.			
3. Principal Office Address 689 Hopkins Hill Road			City West Greenwich	State RI	Zip 02817
4. NAICS Code 339999		6. Brief description of the character of business conducted in Rhode Island Welding			
5. State of Incorporation Rhode Island					
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐					
President Name Edward T. Greene, Jr.			Vice-President Name Eric R. Greene		
Street Address 689 Hopkins Hill Road			Street Address 689 Hopkins Hill Road		
City West Greenwich	State RI	Zip 02817	City West Greenwich	State RI	Zip 02817
Secretary Name Edward T. Greene, Jr.			Treasurer Name Eric R. Greene		
Street Address same as above			Street Address same as above		
City	State	Zip	City	State	Zip
8. List ALL directors (names and addresses) Check the box to indicate an attachment ☐					
Director Name Eric R. Greene			Director Name Edward T. Greene, Jr.		
Street Address same as above			Street Address same as above		
City	State	Zip	City	State	Zip
Director Name Daniel R. Greene			Director Name Alan W. Greene, Jr.		
Street Address same as above			Street Address same as above		
City	State	Zip	City	State	Zip
9. Shares Authorized			10. Shares Issued Check the box to indicate an attachment ☐		
This information is currently of record in the Department of State. Changes require an additional filing.			NUMBER OF SHARES		
			CLASS/SERIES		
			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 Eric R. Greene					Date 3/20/25
Signature of Authorized Representative <i>Eric R. Greene</i>					

MAIL TO:

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