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 10 2025
BY 6308

1. Entity ID Number	2. Exact name of the Corporation
129933	ALPHA ASSOCIATES, LTD.

3. Principal Office Address	City	State	Zip
35 ROCKY HOLLOW ROAD	EAST GREENWICH	RI	02818

4. NAICS Code	6. Brief description of the character of business conducted in Rhode Island
541360	TO CONDUCT LAND SURVEYS AND RELATED ACTIVITIES ON IMPROVED AND UNIMPROVED PARCELS OF REAL ESTATE
5. State of Incorporation: RHODE ISLAND	

7. List ALL officers (names and addresses) — Check the box to indicate an attachment ☐

	President	Vice-President
Name	JAMES J. REDDINGTON, JR.	MICHAEL MCCORMICK
Street Address	17 MIA COURT	35 ROCKY HOLLOW ROAD
City	WARWICK	EAST GREENWICH
State	RI	RI
Zip	02886	02818

	Secretary	Treasurer
Name	JAMES J. REDDINGTON, JR.	JAMES J. REDDINGTON, JR.
Street Address	17 MIA COURT	17 MIA COURT
City	WARWICK	WARWICK
State	RI	RI
Zip	02886	02886

8. List ALL directors (names and addresses) — Check the box to indicate an attachment ☐

	Director		Director	
Name	JAMES J REDDINGTON, JR.			
Street Address	17 MIA COURT			
City	WARWICK			
State	RI			
Zip	02886			

	Director		Director	
Name				
Street Address				
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 ☐

NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
100	COMMON	NONE

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	Date
JAMES J. REDDINGTON, JR., PRESIDENT	03/31/2025

Signature of Authorized Representative: James J Reddington Jr

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

FORM 630- Revised 12.2023