



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

FEB 19 2025

BY 11699

1. Entity ID Number 73183		2. Exact name of the Corporation JAMES R. MODEN, INC.			
3. Principal Office Address 156 CAROLINA NOOSENECK ROAD			City RICHMOND	State RI	Zip 02898
4. NAICS Code 541330		6. Brief description of the character of business conducted in Rhode Island CONSULTING IN FIELD OF MATERIAL AND ENERGY RESOURCES			
5. State of Incorporation RHODE ISLAND					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name KENNETH MODEN			Vice-President Name KENNETH MODEN		
Street Address 156 CAROLINA NOOSENECK ROAD			Street Address 156 CAROLINA NOOSENECK ROAD		
City RICHMOND	State RI	Zip 02898	City RICHMOND	State RI	Zip 02898
Secretary Name BRENDA MODEN			Treasurer Name BRENDA MODEN		
Street Address 156 CAROLINA NOOSENECK ROAD			Street Address 156 CROLINA NOOSENECK ROAD		
City RICHMOND	State RI	Zip 02898	City RICHMOND	State RI	Zip 02898
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name KENNETH MODEN			Director Name BRENDA MODEN		
Street Address 156 CAROLINA NOOSENECK ROAD			Street Address 156 CAROLINA NOOSENECK ROAD		
City RICHMOND	State RI	Zip 02898	City RICHMOND	State RI	Zip 02898
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized			10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>		
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 KENNETH MODEN					Date 02/03/2025
Signature of Authorized Representative 					