RI SOS Filing Number: 202576644390 Date: 7/7/2025 11:53:00 AM

130
A D

## State of Rhode Island

## **Department of State - Business Services Division**

Annual Report for the year: 2019

Corporation

→ Filing period: February 1 - May 1 → Filing Fee: \$50.00

725 725	
ECD RIDOS BSD CUL 7 4411:52:58	<b>,,3</b>

Penalty: Additional \$25.00 fee if form is not filed by May 31.						(O			
Entity ID Number	2. Exact name of the Corporation								
16361	Peckham Brothers Company								
Principal Office Address			City		State		Zıp		
220 Paradise Avenue	20 Paradise Avenue		Middle	Middletown			02842		
4. NAICS Code	6. Brief description of the character of business conducted in Rhode Island								
237310	Heavy Construction								
5. State of Incorporation									
7. List ALL officers (names and ad	and addresses) Check the				e box to indi	cate an att	achment 🔲		
President Name Robin E. Peck	e-President Name								
Street Address 210 Paradise Avenue			Street Add	Street Address					
City Middletown	State RI	<sup>Zip</sup> 02842	City		State		Zıp		
Secretary Name	- 1		Treasurer I	Treasurer Name Robin E. Peckham					
Street Address				Street Address 210 Paradise Avenue					
City	State	Zip	City Middletown		State	——— ⋜I	Z <sub>IP</sub> 02842		
8. List ALL directors (names and a	addresses)	<del>-</del>	1	Check th	e box to indi	cate an at	tachment 🔲		
Director Name			Director Na	ame					
Street Address		Street Address							
City	S:ate	Zıp	City		State		Zıp		
Director Name			Director Name						
Street Address			Street Address						
City	State	Zıp	City		State		Zip		
9. Shares Authorized	1	10. Shares Issu	nares Issued Check the			e box to indicate an attachment			
This information is currently of record in the			NUMBER OF SHARES CLASS/			r	PAR VALUE		
Department of State. Changes require an additional filing.		215		Common	1.00				
11. This report must be executed					orporation is	in the han	ds of a re-		
ceiver or trustee, this report must					componicina	n cobodul	oc and		
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				
Robin E. Peckham					July	July <b>3</b> , 2025			
Signature of Authorized Representative FILED 11:153 A									
MAIL TO: JUL 0.7 2025									

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri gov

