



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. Rhode Street
Providence, RI 02901-2615
(401) 222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2007

Filing Period: January 1 - March 1 • Filing Fee: \$50.00* THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK
*In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 3964		2. Name of Corporation Chamberlin of RI, Inc.			
3. Street Address (Principal Business Office) 160 Greenwich Ave.		City Warwick		State RI	Zip 02886
4. Business Phone No. 401-739-2226		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island SALES & INSTALLATION OF CONSTRUCTION PRODUCTS					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Michael L. Schwab			Vice President Name Nancy J. Schwab		
Street Address 396 Cedar Ave.			Street Address 396 Cedar Ave.		
City East Greenwich	State RI	Zip 02818	City East Greenwich	State RI	Zip 02818
Secretary Name			Treasurer Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) ☐					
AUTHORIZED SHARES					
Number of Shares	Class Series	Par Value	10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐		
300 Comm No Par Value			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
			Number of Shares	Class Series	Par Value
			50	Common	no par value

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.

File Date	8/22/07
Check No.	11650
By:	
FOR SECRETARY OF STATE USE ONLY	

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.

Signature
Nancy J. Schwab
Print or Type Name
Vice President
Title
Aug. 20, 07
Date