



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

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2008

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. 78282		2. Name of Corporation Duro-Last, Inc.			
3. Street Address Principal Business Office 525 Morley Dr			City Saginaw	State MI	Zip 48601
4. Business Phone No. (989) 753-6486		5. State of Incorporation MI			
6. Brief Description of the Character of Business Conducted in Rhode Island Sale, distribution, inspection, & repair of roofing materials & accessories					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Thomas G. Hollingsworth			Vice President Name Sharon L. Sny		
Street Address 525 Morley Dr			Street Address 525 Morley Dr		
City Saginaw	State MI	Zip 48601	City Saginaw	State MI	Zip 48601
Secretary Name Sharon L. Sny			Treasurer Name Sharon L. Sny		
Street Address 525 Morley Dr			Street Address 525 Morley Dr		
City Saginaw	State MI	Zip 48601	City Saginaw	State MI	Zip 48601
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name John C. Burt			Director Name Sharon L. Sny		
Street Address 525 Morley Dr			Street Address 525 Morley Dr		
City Saginaw	State MI	Zip 48601	City Saginaw	State MI	Zip 48601
Director Name Kathy Allen			Director Name Thomas J. Lawler		
Street Address 525 Morley Dr			Street Address 525 Morley Dr		
City Saginaw	State MI	Zip 48601	City Saginaw	State MI	Zip 48601
9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) ☐			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐		
AUTHORIZED SHARES			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
50,000 common	\$1 par value		10,000	Common	1.00

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.

FILED
File Date **MAR 04 2008**
Check No. **By 187256 KM**
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 *Thomas G. Hollingsworth* Date **2-5-08**
Print or Type Name **Tom Hollingsworth**
Title **President, Duro-Last Rofy Inc.**