



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. 000139880		2. Name of Corporation CAROLINA DOOR CONTROLS, INC			
3. Street Address Principal Business Office 3424 INDUSTRIAL DRIVE		City DURHAM		State NC	Zip 27704
4. Business Phone No. 919-381-0094		5. State of Incorporation NORTH CAROLINA			
6. Brief Description of the Character of Business Conducted in Rhode Island SALES AND SERVICE OF AUTOMATIC DOORS					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name GERALD HENDRICK			Vice President Name		
Street Address 6060 CAMELIA DRIVE			Street Address		
City DOUGLASVILLE	State GA	Zip 30135	City	State	Zip
Secretary Name JEFFREY M NEAL			Treasurer Name		
Street Address 2807 CARVER ROAD			Street Address		
City CROFTON	State MD	Zip 21114	City	State	Zip
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name DANIEL P CONNOR			Director Name LAWRENCE O'TOOLE		
Street Address 73 JESSICA CIRCLE			Street Address 32602 COPPERCREST DRIVE		
City SCHWENKSVILLE	State PA	Zip 19473	City TRUBUCO CANYON	State CA	Zip 95079
Director Name CHRISTIAN SALLACH			Director Name		
Street Address BRECKERFELD STRABE 42-48			Street Address		
City D=58256 ENNEPETAL	State GERMANY	Zip	City	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐		
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.			ISSUED SHARES -- THIS SECTION <u>MUST</u> BE COMPLETED		
			Number of Shares	Class/Series	Par Value
			<u>0</u>	<u>0</u>	<u>0</u>

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 OCT 18 2010
Check No. 129033
By: [Signature]
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 Jeffrey M Neal Date 12/4/09
JEFFREY M NEAL
Print or Type Name
SECRETARY/CONTROLLER
Title