



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State - Division of Business Services

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

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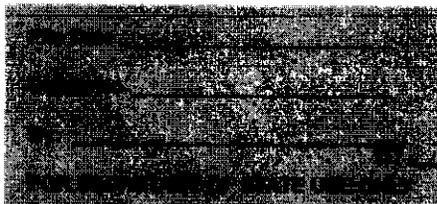
PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2013

Filing Period: January 1 - March 1 • This report must be typed or printed legibly.

Filing Fee: \$50.00 • FAILURE TO FILE THIS REPORT BY MARCH 31 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. 92972		2. Exact name of the Corporation G.D. CONSTRUCTION, ROOFING & SIDING, INC			
3. Principal office address 1625 Victory Highway			City Coventry	State RI	Zip 02818
4. Business Phone No. 401-397-7417			5. State of Incorporation Rhode Island		
6. Brief description of the character of business conducted in Rhode Island Roofing and siding for commercial and residential buildings					
President Name Germain L. Duquette			Vice-President Name		
Street Address 1625 Victory Highway			Street Address		
City Coventry	State RI	Zip 02818	City	State	Zip
Secretary Name Germain L. Duquette			Treasurer Name Germain L. Duquette		
Street Address 1625 Victory Highway			Street Address 1625 Victory Highway		
City Coventry	State RI	Zip 02818	City Coventry	State RI	Zip 02818
Director Name Germain L. Duquette			Director Name		
Street Address 1625 Victory Highway			Street Address		
City Coventry	State RI	Zip 02818	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
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.			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
			100	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.



FILED

JAN 24 2013

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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 of Authorized Representative

Date

Germain L. Duquette, President

Print or Type Name of Authorized Representative