



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
 Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2014

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. 154351		2. Exact name of the Corporation Gerry Couture Carpentry Services, Inc.					
3. Principal office address 2740 Wallum Lake Road				City Pascoag		State RI	Zip 02859
4. Business Phone No. 401/568-6812				5. State of Incorporation Rhode Island			
6. Brief description of the character of business conducted in Rhode Island Carpentry and Construction Services							
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>							
President Name Gerald Couture				Vice-President Name			
Street Address 2740 Wallum Lake Road				Street Address			
City Pascoag		State RI	Zip 02859	City		State	Zip
Secretary Name Gerald Couture				Treasurer Name Gerald Couture			
Street Address 2740 Wallum Lake Road				Street Address 2740 Wallum Lake Road			
City Pascoag		State RI	Zip 02859	City Pascoag		State RI	Zip 02859
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>							
Director Name Gerald Couture				Director Name			
Street Address 2740 Wallum Lake Road				Street Address			
City Pascoag		State RI	Zip 02859	City		State	Zip
Director Name				Director Name			
Street Address				Street Address			
City		State	Zip	City		State	Zip
9. SHARES AUTHORIZED				10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			
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	
				9) 8,000	none	no par value	
				10) Issued 100	none	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 _____

Check No _____

By: _____

FOR SECRETARY OF STATE USE ONLY

FILED

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432

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.

Gerald A. Couture 3-9-14
 Signature of Authorized Representative Date

GERALD A. Couture
 Print or Type Name of Authorized Representative