



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: 2016

Corporation

- Filing period: January 1 - March 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by April 1.

RECEIVED
SECRETARY OF STATE
CORPORATIONS DIV

2016 JUL 26 PM 12:11

1. Entity ID Number 1336541		2. Exact name of the Corporation FIRST CHOICE FENCE, INC.			
3. Principal Office Address 14 DIPONTE DRIVE			City JOHNSTON	State R.I.	Zip 02919
4. Business Phone Number (401) 529-2309		5. State of Incorporation RHODE ISLAND			
6. Brief description of the character of business conducted in Rhode Island FENCE INSTALLATION, DECK AND HAND RAIL WORK					
7. List ALL officers (names and addresses)					Check the box to indicate an attachment <input type="checkbox"/>
President Name JOSEPH DiBENEDETTO			Vice-President Name ROBERT CHARTIER		
Street Address 14 DIPONTE DRIVE			Street Address 82 HILLTOP DRIVE		
City JOHNSTON	State R.I.	Zip 02919	City CRANSTON	State R.I.	Zip 02980
Secretary Name NONE			Treasurer Name NONE		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. List ALL directors (names and addresses)					Check the box to indicate an attachment <input type="checkbox"/>
Director Name NONE			Director Name NONE		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized		10. Shares Issued			
This information is currently of record in the Department of State. Changes require an additional filing.		NUMBER OF SHARES		CLASS/SERIES	PAR VALUE
		NONE			
11. 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. 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.					
Name of Authorized Representative ROBERT CHARTIER				Date 7-26-16	
Signature of Authorized Representative <i>Robert Chartier</i>				SIGN DOCUMENT HERE	

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FILED

JUL 26 2016

MAIL TO:

Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

BY OpB 279902