



State of Rhode Island and Providence Plantations  
**Department of State - Business Services Division**

**Annual Report for the year:** 2017  
**Corporation**

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

1. Entity ID Number <b>104293</b>		2. Exact name of the Corporation <b>Cook's Overhead Doors, Inc.</b>		
3. Principal Office Address <b>206 Gooding Avenue</b>		City <b>Bristol</b>	State <b>RI</b>	Zip <b>02809</b>
4. NAICS Code <b>23 - Construction</b>	6. Brief description of the character of business conducted in Rhode Island <b>To engage in the business of installing and repairing overhead garage doors; To perform general repairs and construction of residential and commercial property</b>			
5. State of Incorporation <b>Rhode Island</b>				
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>				
President Name <b>Christopher Cook</b>		Vice-President Name <b>Christopher Cook</b>		
Street Address <b>8 Highland Road</b>		Street Address <b>8 Highland Road</b>		
City <b>Bristol</b>	State <b>RI</b>	Zip <b>02809</b>	City <b>Bristol</b>	State <b>RI</b>
Secretary Name <b>Christopher Cook</b>		Treasurer Name <b>Christopher Cook</b>		
Street Address <b>8 Highland Road</b>		Street Address <b>8 Highland Road</b>		
City <b>Bristol</b>	State <b>RI</b>	Zip <b>02809</b>	City <b>Bristol</b>	State <b>RI</b>
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>				
Director Name <b>Christopher Cook</b>		Director Name <b>None</b>		
Street Address <b>8 Highland Road</b>		Street Address		
City <b>Bristol</b>	State <b>RI</b>	Zip <b>02809</b>	City	State
Director Name <b>None</b>		Director Name <b>None</b>		
Street Address		Street Address		
City	State	Zip	City	State
9. Shares Authorized <span style="float: right;">10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span></span>				
This information is currently of record in the Department of State.  Changes require an additional filing.		NUMBER OF SHARES		
		CLASS/SERIES		PAR VALUE
		<b>1,000</b>	<b>Common</b>	<b>No Par</b>
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. <i>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.</i>				
Name of Authorized Representative <b>Christopher Cook</b>			Date <b>1-9-17</b>	
Signature of Authorized Representative 				

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

**FILED** *a*  
 JAN 17 2017  
 BY 19123