



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>97972</b>		2. Exact name of the Corporation <b>Rowland Dyer Builders, Inc.</b>			
3. Principal Office Address <b>590 Dugway Bridge Road</b>		City <b>West Kingston</b>		State <b>RI</b>	Zip <b>02892</b>
4. NAICS Code <b>23 - Construction</b>	6. Brief description of the character of business conducted in Rhode Island <b>Construction, Building, General Contracting</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>Rowland Dyer, Jr.</b>			Vice-President Name <b>Cheryl Dyer</b>		
Street Address <b>590 Dugway Bridge Road</b>			Street Address <b>590 Dugway Bridge Road</b>		
City <b>West Kingston</b>	State <b>RI</b>	Zip <b>02892</b>	City <b>West Kingston</b>	State <b>RI</b>	Zip <b>02892</b>
Secretary Name <b>Cheryl Dyer</b>			Treasurer Name <b>Rowland Dyer, Jr.</b>		
Street Address <b>590 Dugway Bridge Road</b>			Street Address <b>590 Dugway Bridge Road</b>		
City <b>West Kingston</b>	State <b>RI</b>	Zip <b>02892</b>	City <b>West Kingston</b>	State <b>RI</b>	Zip <b>02892</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>Rowland Dyer, Jr.</b>			Director Name <b>Cheryl Dyer</b>		
Street Address <b>590 Dugway Bridge Road</b>			Street Address <b>590 Dugway Bridge Road</b>		
City <b>West Kingston</b>	State <b>RI</b>	Zip <b>02892</b>	City <b>West Kingston</b>	State <b>RI</b>	Zip <b>02892</b>
Director Name <b>None</b>			Director Name <b>None</b>		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized					
This information is currently of record in the Department of State.					
Changes require an additional filing.					
10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
NUMBER OF SHARES		CLASS/SERIES		PAR VALUE	
<b>100</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.					
<b>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.</b>					
Name of Authorized Representative <b>Cheryl Dyer</b>				Date <b>FILED 1-28-17</b>	
Signature of Authorized Representative <b>X Cheryl Dyer</b>				<b>SIGN DOCUMENT HERE FEB 01 2017</b>	

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

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