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State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for t Corporation	he year: ———	2017	<u></u>		e e		
 → Filing period: Janua → Filing Fee: \$50.00 → Penalty: Additional \$ 		not filed by April 1.					
1. Entity ID Number	2. Exact nar	ne of the Corporati	on				
45400	Win Dor, Ir	Win Dor, Inc.					
Principal Office Address 3897 Old Post Road			City Charlestown	State RI	Zip 02813		
NAICS Code 6. Brief description of the charac			cter of business conducted in F	Rhode Island			
23 - Construction	Contractor	•					
5. State of Incorporation							
Rhode Island							
7. List ALL officers (names	and addresses)			Check the box to indi	cate an attachment		
President Name J. Paul Clough			Vice-President Name J. Paul Clough				
Street Address 110 Austin Street			Street Address 110 Austin Street				
City Wakefield	State RI	^{Zip} 02879	City Wakefield	State RI	^{Zip} 02879		
Secretary Name J. Paul Clou	ıgh	<u> </u>	Treasurer Name J. Paul Clough				
Street Address 110 Austin S			Street Address 110 Austin Street				
City Wakefield	State RI	Zip 02879	City Wakefield	State RI	^{Zip} 02879		
8. List ALL directors (names	and addresses)	·		Check the box to indi	cate an attachment [
Director Name J. Paul Clough			Director Name None				
Street Address 110 Austin Street			Street Address				
City Wakefield	State RI	^{Zip} 02879	City	State	Zip		
Director Name None			Director Name	<u> </u>	<u> </u>		
Street Address			Street Address				
City	State	Zip	City	State	Zip		

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.

10. Shares Issued

100

NUMBER OF SHARES

Name of Authorized Representative

This information is currently of record in the

Changes require an additional filing.

Date,

Check the box to indicate an attachment L

No Par

Signature of Authorized Representative

SIGN DOCUMENT HEER 0 3 2017

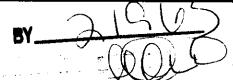
Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov

J. Paul Clough

9. Shares Authorized

Department of State.



CLASS/SERIES

Common