

State of Rhode Island and Providence Plantations

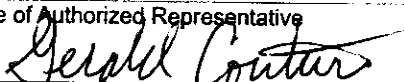
Department of State - Business Services Division

Annual Report for the year:
Corporation2017

→ 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 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. NAICS Code 23 - Construction		6. Brief description of the character of business conducted in Rhode Island Carpentry and Construction Services												
5. State of Incorporation Rhode Island														
7. List ALL officers (names and addresses) Check the box to indicate an 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			Treasurer Name Gerald Couture											
Street Address			Street Address 2740 Wallum Lake Road											
City	State	Zip	City Pascoag	State RI	Zip 02859									
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>														
Director Name			Director Name											
Street Address			Street Address											
City	State	Zip	City	State	Zip									
Director Name			Director Name											
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 Check the box to indicate an attachment <input type="checkbox"/>											
			<table border="1"> <thead> <tr> <th>NUMBER OF SHARES</th> <th>CLASS/SERIES</th> <th>PAR VALUE</th> </tr> </thead> <tbody> <tr> <td>9) 8,000</td> <td>none</td> <td>no par value</td> </tr> <tr> <td>10) issued 100</td> <td>none</td> <td>no par value</td> </tr> </tbody> </table>			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	9) 8,000	none	no par value	10) issued 100	none	no par value
NUMBER OF SHARES	CLASS/SERIES	PAR VALUE												
9) 8,000	none	no par value												
10) issued 100	none	no par value												
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 Gerald Couture				Date 2/19/17										
Signature of Authorized Representative 														

FILED**FEB 23 2017****BY** 844 DS

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-2610