



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 122101		2. Exact name of the Corporation Cole Craft, Inc.			
3. Principal Office Address 230 Summit Drive			City Cranston	State RI	Zip 02920
4. NAICS Code 44-45 - Retail Trade		6. Brief description of the character of business conducted in Rhode Island Sale and retain of gifts and merchandise.			
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 Thomas D'Ercole			Vice-President Name Thomas D'Ercole		
Street Address 230 Summit Drive			Street Address 230 Summit Drive		
City Cranston	State RI	Zip 02920	City Cranston	State RI	Zip 02920
Secretary Name Thomas D'Ercole			Treasurer Name Thomas D'Ercole		
Street Address 230 Summit Drive			Street Address 230 Summit Drive		
City Cranston	State RI	Zip 02920	City Cranston	State RI	Zip 02920
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			10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>		
This information is currently of record in the Department of State. Changes require an additional filing.			NUMBER OF SHARES		
			CLASS/SERIES		
			100	Common	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 Thomas D'Ercole					Date 2-27-17
Signature of Authorized Representative <i>Thomas D'Ercole</i>					

MAIL TO:

Division of Business Services

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