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State of Rhode Island and Providence Plantations

Department of State - Business Services Division

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2017 DEC -5 PM 12: 21

Annual Report for the year: 2017 Limited Liability Company

- → Filing period: September 1 November 1
- → Filing Fee: \$50.00
- → Penalty: Additional \$25.00 fee if form is not filed by December 1.

1. Entity ID Number 1335018	2. Exact name of the Limited Liability Company GCB REMODELING LLC				
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island				
236118	Remodeling/Construction				
5. State of Formation	-				
Rhode Island					
6. Principal Office Address			City	State	Zip
12 Palm Street			North Providence	RI	02904
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Joseph Brunelle			Contact Title Member		
Street Address 12 Palm Street			City North Providence	State RI	^{Zip} 02904
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Check the box to indicate an attachment					
9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. Changes require filing Form 642.					
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 Person Joseph Brunelle Date					17
Signature of Authorized Person					
Josep R Brunelle					

MAIL 10: Division of Business Services

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

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

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BY CM 319128

FORM 632 - Revised: 08/2017