



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

Annual Report for the year: 2018

Corporation


- Filing period: January 1 - March 1
→ Filing Fee: \$50.00
→ Penalty: Additional \$25.00 fee if form is not filed by April 1.

FILED

JAN 25 2018

BY

4672

1. Entity ID Number 46312		2. Exact name of the Corporation FUREY ROOFING AND CONSTRUCTION COMPANY, INC.			
3. Principal Office Address 85 Cypress Street		City Warwick		State RI	Zip 02888
4. NAICS Code 212321		6. Brief description of the character of business conducted in Rhode Island General Contracting of Roofing and Sheet Metal			
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 E. Furey			Vice-President Name Thomas E. Furey		
Street Address 85 Cypress Street			Street Address 85 Cypress Street		
City Warwick	State RI	Zip 02888	City Warwick	State RI	Zip 02888
Secretary Name Thomas E. Furey			Treasurer Name Thomas E. Furey		
Street Address 85 Cypress Street			Street Address 85 Cypress Street		
City Warwick	State RI	Zip 02888	City Warwick	State RI	Zip 02888
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name Thomas E. Furey			Director Name None		
Street Address 85 Cypress Street			Street Address		
City Warwick	State RI	Zip 02888	City	State	Zip
Director Name None			Director Name None		
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"/>		
			NUMBER OF SHARES 600	CLASS/SERIES Common	PAR VALUE No Par
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 E. Furey, President				Date 1/5/18	
Signature of Authorized Representative 				SIGN DOCUMENT HERE	

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