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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.

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CORPORATIONS
2018 JAN 29 A 11:21

1. Entity ID Number	2. Exact name of the Corporation		
000031648	David Presbrey Architects, a corporation		
3. Principal Office Address	City	State	Zip
810 Eddy Street	Providence	RI	02905
4. NAICS Code: 541310	6. Brief description of the character of business conducted in Rhode Island: Architectural Services		
5. State of Incorporation: RI			

7. List ALL officers (names and addresses) — Check the box to indicate an attachment ☐

President Name: Brian E. Poor			Vice-President Name: John L. Dumaliang		
Street Address: 810 Eddy Street			Street Address: 810 Eddy Street		
City: Providence	State: RI	Zip: 02905	City: Providence	State: RI	Zip: 02905
Secretary Name: Brian E. Poor			Treasurer Name: Brian E. Poor		
Street Address: 810 Eddy Street			Street Address: 810 Eddy Street		
City: Providence	State: RI	Zip: 02905	City: Providence	State: RI	Zip: 02905

8. List ALL directors (names and addresses) — Check the box to indicate an attachment ☐

Director Name: Brian E. Poor			Director Name		
Street Address: 810 Eddy Street			Street Address		
City: Providence	State: RI	Zip: 02905	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 ☐

NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
100.00	Common	$1.00

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	Date
Brian E.Poor — **FILED**	January 29, 2018

Signature of Authorized Representative: SIGN DOCUMENT HERE JAN 29 2018

BY 322860

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