

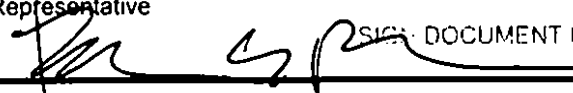


Department of State - Business Services Division

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.

RECEIVED
STATE
SECRETARY OF
CORPORATIONS
2018 JAN 29
11:31 AM

1. Entity ID Number 000031648		2. Exact name of the Corporation David Presbrey Architects, a corporation			
3. Principal Office Address 810 Eddy Street		City Providence		State RI	Zip 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			10. Shares Issued Check the box to indicate an attachment ☐		
This information is currently of record in the Department of State. Changes require an additional filing.			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 Brian E. Poor				Date January 29, 2018	
Signature of Authorized Representative  SIGN DOCUMENT HERE JAN 29 2018 322860					