



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.

1. Entity ID Number 6960		2. Exact name of the Corporation MANSFIELD HEATING, INC			
3. Principal Office Address 37 EDWARD DRIVE		City EAST GREENWICH		State RI	Zip 02818
4. NAICS Code 238222		6. Brief description of the character of business conducted in Rhode Island BUYING, SELLING AND MANUFACTURING OF HEATING UNITS AND SUPPLIES			
5. State of Incorporation RI					
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐					
President Name DEAN MANSFIELD			Vice-President Name KATHLEEN MANSFIELD		
Street Address 37 EDWARD DRIVE			Street Address 37 EDWARD DRIVE		
City EAST GREENWICH	State RI	Zip 02818	City EAST GREENWICH	State RI	Zip 02818
Secretary Name DEAN MANSFIELD			Treasurer Name KATHLEEN MANSFIELD		
Street Address SAME AS ABOVE			Street Address SAME AS ABOVE		
City	State	Zip	City	State	Zip
8. List ALL directors (names and addresses) Check the box to indicate an attachment ☐					
Director Name DEAN MANSFIELD			Director Name KATHLEEN MANSFIELD		
Street Address SAME AS ABOVE			Street Address SAME AS ABOVE		
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 ☐			
This information is currently of record in the Department of State. Changes require an additional filing.		NUMBER OF SHARES		CLASS/SERIES	PAR VALUE
		100		COMMON	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 DEAN MANSFIELD				Date JANUARY 12, 2018	
Signature of Authorized Representative <i>Dean Mansfield</i>				SIGN DOCUMENT HERE FILED	

FEB 13 2018
BY 14325