

State of Rhode Island and Providence Plantations



Department of State - Business Services Division

FILED *ca*

Annual Report for the year: 2018
Corporation

FEB 12 2018

BY 18179

- 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 <u>65040</u>		2. Exact name of the Corporation <u>The Green Door, Inc</u>			
3. Principal Office Address <u>130 Main St.</u>			City <u>East Greenwich</u>	State <u>RI</u>	Zip <u>02818</u>
4. NAICS Code <u>453220</u>		6. Brief description of the character of business conducted in Rhode Island <u>Sale of gifts, home accessories, unique items</u>			
5. State of Incorporation <u>Rhode Island</u>					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name <u>Susan Swanson</u>			Vice-President Name <u>same</u>		
Street Address <u>130 Main St.</u>			Street Address		
City <u>East Greenwich</u>	State <u>RI</u>	Zip <u>02818</u>	City	State	Zip
Secretary Name <u>same</u>			Treasurer Name <u>same</u>		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name <u>Susan Swanson</u>			Director Name <u>NONE</u>		
Street Address <u>130 Main St.</u>			Street Address		
City <u>East Greenwich</u>	State <u>RI</u>	Zip <u>02818</u>	City	State	Zip
Director Name <u>NONE</u>			Director Name <u>NONE</u>		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized		10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>			
This information is currently of record in the Department of State. Changes require an additional filing.		NUMBER OF SHARES		CLASS/SERIES	
		PAR VALUE			
		<u>100</u>		<u>COMMON</u>	
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 <u>Susan Swanson</u>				Date <u>2.6.18</u>	
Signature of Authorized Representative <i>Susan Swanson</i>					