



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

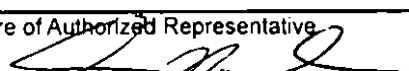
FILED

FEB 26 2018

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.

BY 1176

1. Entity ID Number 132273		2. Exact name of the Corporation Westerly Auto Sales, Inc.												
3. Principal Office Address 74 School Street			City Westerly	State RI	Zip 02891									
4. NAICS Code 423110		6. Brief description of the character of business conducted in Rhode Island The sale of automobiles at wholesale and retail.												
5. State of Incorporation Rhode Island														
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐														
President Name Stiles M. Gilmore, IV			Vice-President Name Stiles M. Gilmore, IV											
Street Address 74 School Street			Street Address 74 School Street											
City Westerly	State RI	Zip 02891	City Westerly	State RI	Zip 02891									
Secretary Name Esta Kleon			Treasurer Name Laura Scalise											
Street Address 74 School Street			Street Address 74 School Street											
City Westerly	State RI	Zip 02891	City Westerly	State RI	Zip 02891									
8. List ALL directors (names and addresses) Check the box to indicate an attachment ☐														
Director Name			Director Name											
Street Address			Street Address											
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.		<table border="1"> <thead> <tr> <th>NUMBER OF SHARES</th> <th>CLASS/SERIES</th> <th>PAR VALUE</th> </tr> </thead> <tbody> <tr> <td>100</td> <td>common</td> <td>no par value</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table>				NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	100	common	no par value			
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100	common	no par value												
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 Stiles M. Gilmore, IV				Date 2-15-18										
Signature of Authorized Representative  SIGN DOCUMENT HERE														