

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

FILED

JAN 31 2019

BY 28704

Annual Report for the year: 2019

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 6387		2. Exact name of the Corporation DeBlois Building Co.					
			City		State	Zip	
3. Principal Office Address 109 Airport Road			City Warwick		RI	02889	
4. NAICS Code	6. Brief descr	ription of the charac	cter of business o	onducted in Rhode Is	sland		
531190	Buv. soll le	Buy, sell, lease, improve and deal with real and personal proprety, to operate a general					
5. State of Incorporation	•	construction business					
Rhode Island							
				Chack	the hoy to inc	dicate an attachment 🔲	
7. List ALL officers (names ar	nd addresses)		Vice-President	Name Data S	Clair III	nivers or armorman	
President Name Robert E. DeBlois Jr.			Vice-President Name Robert E. DeBlois III				
Street Address 109 Airport Ro	Street Address 109 Airport Road						
City Warwick	State RI	Zip 02889	City Warwick		State RI	^{Zıp} 02889	
Secretary Name Robert E. De	Treasurer Name Robert E. DeBlois, Jr.						
Street Address 109 Airport Road			Street Address 109 Airport Road				
City Warwick	State RI	Zlp 02889	City Warwick		State RI	Zip 02889	
8. List ALL directors (names	and addresses)			Check	the box to in	dicate an attachment 🔲	
Director Name			Director Name	•			
Street Address			Street Address				
City	State	Zip	City		State	Zip	
Director Name			Director Name				
Street Address			Straet Addres	s			
]					lo	1710	
City	State	Žip	City		State	Zip	
O. Dhanas Authorized		10. Shares Is:		sued Check the box to indicate an attachment			
9. Shares Authorized This information is currently of			OF SHARES	PARTICIPATION OF THE PARTICIPA			
Department of State.		100		Common		No Par Value	
Changes require an additional filing.				-		<u> </u>	
11. This report must be exec	uted on behalf of th	e corporation by an	authorized repre	sentative. If the corp	oration is in t	he hands of a receiver or	
In the second second second second	avacuted on bobalf (of the corporation h	u the receiver or t	rusiee.			
Under penalty of perjury, I	declare and affirm	that I have exami	ined this report,	including any acco	mpanying so	enequies and	
statements, and that all st	<u>atements containe</u>	d herein are true a	and correct.		Date ,		
Name of Authorized Representative					1//	7/19	
Robert E. DeBlois Jr.					1 //	'///	
Signature of Authorized Rep	resentative		•				

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov