



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

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.

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SECRETARY OF STATE
CORPORATIONS DIV

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STAMP

FOR
SECRETARY OF STATE
CORPORATIONS DIV

1. Entity ID Number <u>000033397</u>		2. Exact name of the Corporation <u>DJ Greene Home Dryn Inc.</u>	
3. Principal Office Address <u>63 Prospect St</u>		City <u>Barrington</u>	State <u>R.I</u>
		Zip <u>02806</u>	
4. NAICS Code <u>236118</u>	6. Brief description of the character of business conducted in Rhode Island <u>Siding + windows</u>		
5. State of Incorporation <u>R.I.</u>			
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐			
President Name <u>DAVID J GREENE</u>		Vice-President Name	
Street Address <u>63 Prospect St</u>		Street Address	
City <u>Barrington</u>	State <u>R.I</u>	Zip <u>02806</u>	
Secretary Name		Treasurer Name	
Street Address		Street Address	
City	State	Zip	
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	
Director Name		Director Name	
Street Address		Street Address	
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.		NUMBER OF SHARES <u>600</u>	CLASS/SERIES <u>Class A</u>
Changes require an additional filing.			PAY VALUE <u>NO PAR</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>DAVID J. GREENE</u>		Date <u>2/11/19</u>	
Signature of Authorized Representative <u>David J. Greene</u>		SIGN DOCUMENT FILED	

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