



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.

**FILED**  
**MAR 15 2019**  
 BY *98846-DS*

1. Entity ID Number <b>000103553</b>		2. Exact name of the Corporation <b>Composite Solutions, Inc.</b>			
3. Principal Office Address <b>8501 North Scottsdale Road, Suite 100</b>			City <b>Scottsdale</b>	State <b>AZ</b>	Zip <b>85253</b>
4. NAICS Code <b>339999</b>		6. Brief description of the character of business conducted in Rhode Island <b>The manufacture, sale and distribution of composites products of all all kinds and descriptions.</b>			
5. State of Incorporation <b>Delaware</b>					
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name <b>Steven C. Lockard, CEO and President</b>			Vice-President Name		
Street Address <b>8501 North Scottsdale Road, Suite 100</b>			Street Address		
City <b>Scottsdale</b>	State <b>AZ</b>	Zip <b>85253</b>	City	State <b>AZ</b>	Zip
Secretary Name <b>Steve Fishbach, General Counsel and Secretary</b>			Treasurer Name <b>William Siwek, CFO and Treasurer</b>		
Street Address <b>8501 North Scottsdale Road, Suite 100</b>			Street Address <b>8501 North Scottsdale Road, Suite 100</b>		
City <b>Scottsdale</b>	State <b>AZ</b>	Zip <b>85253</b>	City <b>Scottsdale</b>	State <b>AZ</b>	Zip <b>85253</b>
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name			Director Name		
Street Address <b>8501 North Scottsdale Road, Suite 100</b>			Street Address <b>8501 North Scottsdale Road, Suite 100</b>		
City <b>Scottsdale</b>	State <b>AZ</b>	Zip	City <b>Scottsdale</b>	State <b>AZ</b>	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized			10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>		
This information is currently of record in the Department of State.  Changes require an additional filing.			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
			20,000 Authorized	CWP	\$0.001000
			10,375 Issued	CWP	\$0.001000
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. <i>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.</i>					
Name of Authorized Representative <b>Steve Fishbach, General Counsel and Secretary</b>				Date <b>2-25-2019</b>	
Signature of Authorized Representative <i>[Signature]</i>				SIGN DOCUMENT HERE	

**MAIL TO:**  
 Division of Business Services  
 148 W. River Street, Providence, Rhode Island 02904-2615  
 Phone: (401) 222-3040  
 Website: www.sos.ri.gov