



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: **2017**
Corporation

→ Filing period: January 1 - March 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by April 1.

2020 JAN 30 PM 1:18

1. Entity ID Number 000164689		2. Exact name of the Corporation Wild wind investment group Co.												
3. Principal Office Address 152 Bears Den Road			City Tiverton	State RI	Zip 02878									
4. NAICS Code 814110	6. Brief description of the character of business conducted in Rhode Island Clean houses													
5. State of Incorporation Rhode Island														
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>														
President Name Nancy Jones			Vice-President Name Nancy Jones											
Street Address 152 Bears Den Road			Street Address 152 Bears Den Road											
City Tiverton	State RI	Zip 02878	City Tiverton	State RI	Zip 02878									
Secretary Name			Treasurer Name											
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 Nancy Jones			Director Name											
Street Address 152 Bears Den Road			Street Address											
City Tiverton	State RI	Zip 02878	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 <input type="checkbox"/>												
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>\$.01</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table>				NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	100	common	\$.01			
		NUMBER OF SHARES	CLASS/SERIES	PAR VALUE										
100	common	\$.01												
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 Nancy Jones					Date 1-28-2020									
Signature of Authorized Representative <i>Nancy Jones</i>														

FILED

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

JAN 30 2020

BY *PGGE B*

FORM 630 - Revised: 10/2017