



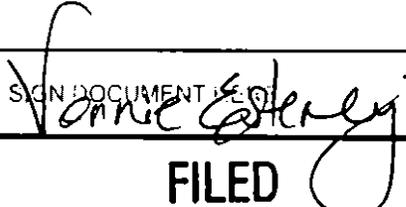
Department of State - Business Services Division

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 R.I. DEPT. OF STATE
 BUS SVCS DIV.

2020 MAR 31 AM 13

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.

1. Entity ID Number 000608943		2. Exact name of the Corporation Pinnacle Construction Inc			
3. Principal Office Address PO Box 368 22060 221st Street			City Glenwood		State IA
			Zip 51534		
4. NAICS Code 236200		6. Brief description of the character of business conducted in Rhode Island Construction			
5. State of Incorporation IA					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Vonnie Esterling			Vice-President Name Greg Esterling		
Street Address 57301 220th Street			Street Address 57301 220th Street		
City Glenwood		State IA	Zip 51534	City Glenwood	
				State IA	
				Zip 51534	
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			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 <input type="checkbox"/>		
This information is currently of record in the Department of State. Changes require an additional filing.			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
			16356	Common	1
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 Vonnie Esterling				Date 03/27/20	
Signature of Authorized Representative 					

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

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MAR 31 2020 10:17

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