



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Matthew A. Brown, Secretary of State

Corporations Division
100 North Main Street
Providence, RI 02903-1335
401 222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No 38065		2. Name of Corporation GIORGIO S. GENCARELLI & SONS, INC.			
3. Street Address Principal Business Office 43 Trolley Lane		City Westerly		State RI	Zip 02891
4. Business Phone No. 401 596 2319		5. State of Incorporation RHODE ISLAND			6. SIC Code 299
7. Brief Description of the Character of Business Conducted in Rhode Island MASONRY CONTRACTOR					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Giorgio S. Gencarelli			Vice President Name Maria Gencarelli		
Street Address 43 Trolley Lane			Street Address Same		
City Westerly	State RI	Zip 02891	City	State	Zip
Secretary Name Maria Gencarelli			Treasurer Name Giorgio S. Gencarelli		
Street Address Same			Street Address Same		
City	State	Zip	City	State	Zip
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
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
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) ☐			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
400 NO PAR VALUE			400	none	No Par Value

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



FILED

File Date **FEB 24 2005 5513**
Check No. **143-**
By **143-**

FOR SECRETARY OF STATE USE ONLY

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.

Signature of Officer
Giorgio S. Gencarelli
Date
Pres
Print or Type Name of Officer
Pres
Title of Officer



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Matthew A. Brown, Secretary of State

Corporations Division
100 North Main Street
Providence, RI 02903-1335
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 38065		2. Name of Corporation GIORGIO S. GENCARELLI & SONS, INC.	
3. Street Address Principal Business Office 43 Trolley Lane		City Westbury	State RI
4. Business Phone No 401 596 2319		5. State of Incorporation RHODE ISLAND	6. SIC Code 299
7. Brief Description of the Character of Business Conducted in Rhode Island MASONRY CONTRACTOR			
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name Giorgio S Gencarelli		Vice President Name Maria Gencarelli	
Street Address 43 Trolley Lane		Street Address Same	
City Westbury	State RI	City Westbury	State RI
Secretary Name Maria Gencarelli		Treasurer Name Giorgio Gencarelli	
Street Address Same		Street Address Same	
City Westbury	State RI	City Westbury	State RI
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS			
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) ☐ 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐			
AUTHORIZED SHARES		ISSUED SHARES	
Number of Shares	Class/Series	Number of Shares	Class/Series
400 NO PAR VALUE		400	none
			No Par Value

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 3 8 0 6 5 *

File Date	C-3-04
Check No.	5264
By:	de
FOR SECRETARY OF STATE USE ONLY	

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.

Signature of Officer
Giorgio S Gencarelli
Date
2/2/04
Print or Type Name of Officer
Giorgio S Gencarelli
Title of Officer
Pres



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Edward S. Inman, III, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003
Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)



1. Corporate ID No. **38065**
2. Name of Corporation **GIORGIO S. GENCARELLI & SONS, INC.**
3. Street Address Principal Business Office
43 Trolley Lane
4. Business Phone No. **401 596 2319**
5. State of Incorporation **RHODE ISLAND**

City **Westerly** State **RI** Zip **02891**
6. SIC Code **299**

7. Brief Description of the Character of Business Conducted in Rhode Island
MASONRY CONSTRUCTION

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name **Giorgio S. Gencarelli**
Street Address **43 Trolley Lane**
City **Westerly** State **RI** Zip **02891**
Secretary Name **Maria Gencarelli**
Street Address **Same**
City _____ State _____ Zip _____

Vice President Name **Maria Gencarelli**
Street Address **Same**
City _____ State _____ Zip _____
Treasurer Name **Giorgio Gencarelli**
Street Address **Same**
City _____ State _____ Zip _____

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name	Street Address	City	State	Zip

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares	Class/Series	Par Value
400 NO PAR VALUE		

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES

Number of Shares	Class/Series	Par Value
400	nm	No Par Value

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 3 8 0 6 5 *

File Date: **4-23-03**
Check No.: **5027**
By: **ac**

FOR SECRETARY OF STATE USE ONLY

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.

Signature of Officer **Giorgio S. Gencarelli** Date **3-15-03**
Print or Type Name of Officer **Giorgio S. Gencarelli**
Title of Officer **Pres**



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Edward S. Inman, III, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002
Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)



1. Corporate ID No. 38065 2. Name of Corporation GIORGIO S. GENCARELLI & SONS, INC.
3. Street Address Principal Business Office 43 Trolley Lane City Westerly State RI Zip 02891
4. Business Phone No. 401-596-2319 5. State of Incorporation RHODE ISLAND 6. SIC Code 299

7. Brief Description of the Character of Business Conducted in Rhode Island
Masonry Contractor

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) **FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name <u>Giorgio S Gencarelli</u>	Vice President Name <u>Maria Gencarelli</u>
Street Address <u>43 Trolley Lane</u>	Street Address <u>Same</u>
City <u>Westerly</u> State <u>RI</u> Zip <u>02891</u>	City <u>Same</u> State <u>RI</u> Zip <u>02891</u>
Secretary Name <u>Maria Gencarelli</u>	Treasurer Name <u>Giorgio S Gencarelli</u>
Street Address <u>Same</u>	Street Address <u>Same</u>
City <u>Same</u> State <u>RI</u> Zip <u>02891</u>	City <u>Same</u> State <u>RI</u> Zip <u>02891</u>

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) **FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name	Director Name
Street Address	Street Address
City	City
State	State
Zip	Zip
Director Name	Director Name
Street Address	Street Address
City	City
State	State
Zip	Zip

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares	Class/Series	Par Value
<u>400 NO PAR VALUE</u>		

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES

Number of Shares	Class/Series	Par Value
<u>400</u>	<u>none</u>	<u>No Par Value</u>

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 3 8 0 6 5 *

File Date: 3-18-02

Check No.: 66676

By: [Signature]

FOR SECRETARY OF STATE USE ONLY

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.

Giorgio S Gencarelli 3/14/02
Signature of Officer Date

Giorgio Gencarelli
Print or Type Name of Officer

Pres
Title of Officer



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3046



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001
Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **38065** 2. Name of Corporation **GIORGIO S. GENCARELLI & SONS, INC.**
3. Street Address Principal Business Office **43 Trolley Lane** City **Westbury** State **RI** Zip **02891**
4. Business Phone No. **401 596 2319** 5. State of Incorporation **RHODE ISLAND** 6. SIC **299**

7. Brief Description of the Character of Business Conducted in Rhode Island
Masonry Contractor

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) **FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name Giorgio S Gencarelli	Vice President Name Maria Gencarelli
Street Address 43 Trolley Lane	Street Address Same
City Westbury State RI Zip 02891	City Same State RI Zip 02891
Secretary Name Maria Gencarelli	Treasurer Name Giorgio S Gencarelli
Street Address Same	Street Address Same
City Westbury State RI Zip 02891	City Westbury State RI Zip 02891

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) **FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name	Director Name
Street Address	Street Address
City	City
State	State
Zip	Zip
Director Name	Director Name
Street Address	Street Address
City	City
State	State
Zip	Zip

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares	Class/Series	Par Value
400 NO PAR VAL		

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES

Number of Shares	Class/Series	Par Value
400	none	No Par Value

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 3 8 0 6 5 *

File Date: **6/20/01**
Check No.: **6375**
By: **GM**

FOR SECRETARY OF STATE USE ONLY

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.

Giorgio A. Gencarelli 3/15/01
Signature of Officer Date
Giorgio S Gencarelli
Print or Type Name of Officer
Pres
Title of Officer



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000
Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID # <u>38065</u>		2. Name of Corporation <u>GIORGIO S. GENCARELLI & SONS, INC.</u>	
3. Street Address Principal Business Office <u>43 Trolley Ln</u>		City <u>Westerly</u>	State <u>RI</u> Zip <u>02891</u>
4. Business Phone No.		5. State of Incorporation <u>RHODE ISLAND</u>	
6. <u>299</u>			
7. Brief Description of the Character of Business Conducted in Rhode Island <u>Masonry Contractor</u>			
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name <u>Giorgio S Gencarelli</u>		Vice President Name <u>Maria Gencarelli</u>	
Street Address <u>43 Trolley Ln</u>		Street Address <u>Same</u>	
City <u>Westerly</u>	State <u>RI</u>	City <u>Same</u>	State <u>RI</u>
Zip <u>02891</u>		Zip <u>02891</u>	
Secretary Name <u>Maria Gencarelli</u>		Treasurer Name <u>Giorgio Gencarelli</u>	
Street Address <u>Same</u>		Street Address <u>Same</u>	
City <u>Same</u>	State <u>RI</u>	City <u>Same</u>	State <u>RI</u>
Zip <u>02891</u>		Zip <u>02891</u>	
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS			
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)			
AUTHORIZED SHARES			
Number of Shares	Class/Series	Par Value	
<u>400 NO PAR VAL</u>			
11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)			
ISSUED SHARES			
Number of Shares	Class/Series	Par Value	
<u>400</u>	<u>None</u>	<u>No Par Value</u>	

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 3 8 0 6 5 *

File Date: 3/8/00

Check No.: 6038

By: [Signature]

FOR SECRETARY OF STATE USE ONLY

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.

Giorgio S Gencarelli 3/1/00
Signature of Officer Date

Giorgio S Gencarelli
Print or Type Name of Officer
Title of Officer President

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR **1999**

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)



1. Corporate ID No. 38065		2. Name of Corporation GIORGIO S. GENCARELLI & SONS, INC.			
3. Street Address Principal Business Office 43 Trolley Lane			City Westerly	State RI	Zip 02891
4. Business Phone No. 401 596 2319		5. State of Incorporation RHODE ISLAND			6. SIC Code 289
7. Brief Description of the Character of Business Conducted in Rhode Island Masonry Contractor					
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Giorgio S Gencarelli			Vice President Name Maria Gencarelli		
Street Address 43 Trolley Lane			Street Address Same		
City Westerly	State RI	Zip 02891	City	State	Zip
Secretary Name Maria Gencarelli			Treasurer Name Giorgio Gencarelli		
Street Address Same			Street Address Same		
City	State	Zip	City	State	Zip
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
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
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT) ☐ 11. SHARES ISSUED (*X* BOX FOR ATTACHMENT) ☐					
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
400 NO PAR VAL			400	none	No Par Value

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 3 8 0 6 5 *

File Date: **Mar 17, 99**

Check No.: **3829**

By: **[Signature]**

FOR SECRETARY OF STATE USE ONLY

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.

Giorgio S Gencarelli
Signature of Officer Date

Giorgio S Gencarelli
Print or Type Name of Officer

Pres
Title of Officer



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-277-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1998

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 38065		2. Name of Corporation GIORGIO S. GENCARELLI & SONS, INC.			
3. Street Address Principal Business Office 43 Trolley Lane		City Westerly	State RI	Zip 02891	
4. Business Phone No. 401-596-2319		5. State of Incorporation RHODE ISLAND			6. SIC Code 0289
7. Brief Description of the Character of Business Conducted in Rhode Island Masonry Contractor					
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) ☒					
President Name Giorgio S Gencarelli			Vice President Name Maria Gencarelli		
Street Address 43 Trolley Lane			Street Address Same		
City Westerly	State RI	Zip 02891	City	State	Zip
Secretary Name Maria Gencarelli			Treasurer Name Giorgio S Gencarelli		
Street Address Same			Street Address Same		
City	State	Zip	City	State	Zip
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) ☒					
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
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT) ☒ 11. SHARES ISSUED (*X* BOX FOR ATTACHMENT) ☒					
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
400 NO PAR VAL			400	none	No Par Value

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 3 8 0 6 5 *

File Date: 2/20/98	
Check No.: 3195	
By: KLD	
FOR SECRETARY OF STATE USE ONLY	

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.

Giorgio S. Gencarelli **2/1/98**
Signature of Officer Date
Giorgio S Gencarelli
Print or Type Name of Officer
Pres
Title of Officer



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-277-3040

PROFIT CORPORATION ANNUAL REPORT 1997

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)



1. Corporate ID No. 38065		2. Name of Corporation GIORGIO S. GENCARELLI & SONS, INC.			
3. Street Address Principal Business Office 43 Trolley Lane		City Westerly	State RI	Zip 02891	
4. Business Phone No. 401-596-2319		5. State of Incorporation RHODE ISLAND		6. SIC Code 0299	
7. Brief Description of the Character of Business Conducted in Rhode Island Masonry Contractor					
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) ☒					
President Name Giorgio S Gencarelli		Vice President Name Maria Gencarelli			
Street Address 43 Trolley Lane		Street Address Same			
City Westerly	State RI	Zip 02891	City	State	
Secretary Name Maria Gencarelli		Treasurer Name Giorgio S Gencarelli			
Street Address Same		Street Address Same			
City	State	Zip	City	State	
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) ☐					
Director Name		Director Name			
Street Address		Street Address			
City	State	Zip	City	State	
Director Name		Director Name			
Street Address		Street Address			
City	State	Zip	City	State	
10. SHARES AUTHORIZED AND ISSUED (*X* BOX FOR ATTACHMENT) ☐					
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
400 NO PAR VAL			400	none	No Par Value

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



File Date: **3.19.97**

Check No.: **3177**

By: **VP**

FOR SECRETARY OF STATE USE ONLY

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.

Giorgio S. Gencarelli 3/15/97
Signature of Officer Date

Giorgio S Gencarelli
Print or Type Name of Officer

Pres
Title of Officer

PROFIT CORPORATION ANNUAL REPORT

1996



State of Rhode Island and Providence Plantations
James R. Langevin, Secretary of State
Corporations Division
100 North Main Street
Providence, Rhode Island 02903-1335 • (401) 277-3040

Filing Period: January 1-March 1
Filing Fee: \$50.00

PLEASE TYPE OR PRINT IN BLACK INK.

1. CORPORATE ID NO 38065		2. NAME OF CORPORATION GIORGIO S. GENCARELLI & SONS, INC.	
3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE 43 Trolley Lane		CITY Westerly	STATE RI
4. BUSINESS PHONE NO. 401-596-2319		5. STATE OF INCORPORATION RHODE ISLAND	
		6. SIC CODE 0299	
7. BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE ISLAND Masonry Contractor			
8. NAMES AND ADDRESSES OF THE OFFICERS			
PRESIDENT NAME Giorgio S. Gencarelli		VICE PRESIDENT NAME Maria Gencarelli	
STREET ADDRESS 43 Trolley Lane		STREET ADDRESS Same	
CITY Westerly	STATE RI	ZIP CODE 02891	
SECRETARY NAME Maria Gencarelli		TREASURER NAME Giorgio S. Gencarelli	
STREET ADDRESS Same		STREET ADDRESS Same	
CITY	STATE	ZIP CODE	
9. NAMES AND ADDRESSES OF THE DIRECTORS			
DIRECTOR NAME		DIRECTOR NAME	
STREET ADDRESS		STREET ADDRESS	
CITY	STATE	ZIP CODE	
DIRECTOR NAME		DIRECTOR NAME	
STREET ADDRESS		STREET ADDRESS	
CITY	STATE	ZIP CODE	
10. SHARES AUTHORIZED AND ISSUED			
AUTHORIZED SHARES			ISSUED SHARES
NUMBER OF SHARES	CLASS / SERIES	PAR VALUE	
400 NO PAR VAL			

This report must be **SIGNED IN INK** by either the
President, Vice President, Secretary, Assistant Secretary, Treasurer, 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.

File Date: 4/16/96
Check No: 2877
By: ce/lf

Signature of Officer: Giorgio S. Gencarelli
Print or Type Name of Officer: Giorgio S. Gencarelli
Title of Officer: Pres
Date: 3-11-96

For Secretary of State Use Only

DETACH BOTTOM BEFORE RETURNING

FORM 31 12/95



ANNUAL REPORT

Please Type or Print
File Annually - Jan. 1 - March 1
Filing Fee \$50.00

Make Checks Payable to: Secretary of State

ALL ENTRIES MUST BE COMPLETED IN FULL OR THE FORM WILL BE RETURNED.

Corporate ID: 0038055 Annual Report for the year: 1995

Name of Corporation: GIORGIO S. GENCARELLI & SONS, INC.

Business entity organized under the laws of the State of: RI

For foreign entity, address and telephone number of principal office:

Business Entity is (check one):

☒ Business Corporation (See RIGL Chapter 7-1.1)

☐ Professional Service Corporation (See RIGL Chapter 7-5.1)

Phone: ()

Brief statement of the character of business conducted in Rhode Island:

Masonry Contractor

Address and telephone of the principal office of business entity in Rhode

Island (Provide street address - Not P.O. Box):

Giorgio S. Gencarelli
43 Trolley Lane
Westerly RI 02891
Phone: (401) 596-2319

THE NAMES OF THE OFFICERS ARE:

OFFICER	STREET ADDRESS	CITY/STATE	ZIP CODE
PRESIDENT <u>Giorgio S. Gencarelli</u>	<u>43 Trolley Lane</u>	<u>Westerly RI</u>	<u>02891</u>
VICE PRESIDENT <u>Marie Gencarelli</u>	<u>"</u>	<u>"</u>	<u>"</u>
SECRETARY <u>Maria Gencarelli</u>	<u>"</u>	<u>"</u>	<u>"</u>
TREASURER <u>Giorgio Gencarelli</u>	<u>"</u>	<u>"</u>	<u>"</u>

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE

NUMBER OF SHARES AUTHORIZED (Rider may be attached)

Number of Shares 400 Class / Series

No Par

NUMBER OF SHARES ISSUED AND OUTSTANDING (Rider may be attached)

Number of Shares 400 Class / Series

No Par

Date March 15, 1995

By: Giorgio S. Gencarelli
Giorgio S. Gencarelli
PRINT OR TYPE NAME OF OFFICER SIGNING
TITLE OF OFFICER SIGNING Pres

Form 3: 1/95

DESIGNATED REGISTERED AGENT FOR SERVICE OF PROCESS:

PLEASE NOTE: If the registered office and/or registered agent indicated below is incorrect, Form 9 must be filed. ck 2602

THOMAS J. CAPALBO, JR.
67 HIGH STREET
WESTERLY RI 02891

PAID
MAR 17 1995
SECRETARY OF STATE

Filing Fee \$50.00
Payable to:
Secretary of State

PLEASE TYPE OR PRINT
State of Rhode Island and Providence Plantations
Office of The Secretary of State
100 North Main Street
Providence, Rhode Island 02903-1335
401 277-3040

File Annually
LLC Sept 1 - Nov 1
CORP Jan 1 - March 1

PPC 62321
\$50.00

0038065

1994

Corporate ID _____ Annual Report for the year: _____
GIORGIO S. GENCARELLI & SONS, INC.

Name of Business Entity: _____

Business entity organized under the laws of the State of RI

Federal Taxpayer Identification Number _____

For foreign entity, address and telephone number of principal office _____

Phone () _____

Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box)

GIORGIO S. GENCARELLI

43 TROLLEY LANE WESTERLY RI 02891

Phone 401 596-2319

Business Entity is (check one)

- ☒ Business Corporation (See RIGL Chapter 7-1.1)
☐ Professional Service Corporation (See RIGL Chapter 7-5.1)
☐ Limited Liability Company (See RIGL 7-16)

Name, title and mailing address of contact person to whom communications may be directed

Giorgio S. Gencarelli, Pres
43 Trolley Lane
Westerly RI 02891

Brief statement of the character of business conducted in Rhode Island

Masonry Contractor

Date of Organization 2-5-86 4/1/86 HE

Date of Qualification to do business in Rhode Island (if foreign entity) _____

THE NAMES OF THE OFFICERS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
<u>Giorgio S. Gencarelli</u>	<u>43 Trolley Lane</u>	<u>Westerly RI</u>	<u>02891</u>
<u>Maria</u>			
<u>Maria</u>			
<u>Giorgio S.</u>			

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE

NUMBER OF SHARES AUTHORIZED (if Applicable)

NUMBER 400

CLASS _____

SERIES _____

PAR VALUE OR WITHOUT PAR No Par

Date March 14, 94

NUMBER OF SHARES ISSUED AND OUTSTANDING (if Applicable)

NUMBER 400

CLASS _____

SERIES _____

PAR VALUE OR WITHOUT PAR No Par

By

Giorgio S. Gencarelli
Giorgio S. Gencarelli
Pres

Form 31 1994

DESIGNATED REGISTERED OR RESIDENT AGENT FOR SERVICE OF PROCESS:

PLEASE NOTE: If the Corporation has changed its registered office and/or registered or resident agent, Form 9 or Form LLC 3 must be filed.

THOMAS J. CAFALEO, JR.
67 HIGH STREET
WESTERLY RI 02891

FILED

APR 28 1994

By ME59

Filing Fee \$50.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

2064 mme

Corporate ID 0032065

Annual Report for the year 1993

FIRST: The name of the corporation is GIORGIO S. GENCARELLI & SONS, INC.

SECOND: It is incorporated under the laws of RI

THIRD: Character of business, briefly stated, is Masonry Contractor

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 43 Trolly Lane Westerly RI 02891

SIXTH: Names and addresses of its directors and officers:

(Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
Giorgio S. Gencarelli	Director	43 Trolly Lane Westerly RI
Maria Gencarelli	Director	
	Director	
Giorgio S. Gencarelli	President	
Maria	Vice President	
Maria	Secretary	
Giorgio	Treasurer	

SEVENTH: Number of Shares authorized:

No. of Shares

Class

Series

Par Value
or statement that
shares are without
par value

400

MAR 18 1993

No Par

EIGHTH: Number of Shares issued:

No. of Shares

Class

Series

Par Value
or statement that
shares are without
par value

400

SECY OF STATE

No Par

Dated March 15 19 93

Giorgio S. Gencarelli & Sons Inc.
(Name of Corporation)

By Giorgio S. Gencarelli

Title President

(Report must be signed by an officer)

Filing Fee \$50.00

To be filed annually between
January 1st and March 1st

1796 JB
State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 0038055 Annual Report for the year 1992

FIRST: The name of the corporation is GIORGIO S. GENCARELLI & SONS, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is to perform masonry and construction work, including, but not limited to, laying cement blocks, bricks, stones, cement floors, tile and stucco.

FOURTH: If foreign corporation, address of its principal office N/A

FIFTH: Business address in Rhode Island 43 Trolley Lane, Westerly, RI 02891

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
	Director	
	Director	
	Director	
<u>Giorgio S. Gencarelli</u>	<u>President</u>	<u>43 Trolley Lane, Westerly, RI 02891</u>
<u>Maria Gencarelli</u>	<u>Vice President</u>	<u>43 Trolley Lane, Westerly, RI 02891</u>
<u>Maria Gencarelli</u>	<u>Secretary</u>	<u>43 Trolley Lane, Westerly, RI 02891</u>
<u>Giorgio S. Gencarelli</u>	<u>Treasurer</u>	<u>43 Trolley Lane, Westerly, RI 02891</u>

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
<u>400</u>		<u>PAID</u>	<u>None</u>

JUL 16 1992

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
<u>400</u>			<u>None</u>

SECY OF STATE

Dated 3-11 1992

Giorgio S. Gencarelli & Sons, Inc.
(Name of Corporation)

By Giorgio S. Gencarelli
Title Giorgio S. Gencarelli, President

(Report must be signed by an officer)

Filing Fee \$50.00

1859 g/b.

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 0038065

Annual Report for the year 1991

FIRST: The name of the corporation is Giorgio S Gencarelli + Sons Inc

SECOND: It is incorporated under the laws of RI

THIRD: Character of business, briefly stated, is General Masonry Contractor

FOURTH: If foreign corporation, address of its principal office NA

FIFTH: Business address in Rhode Island 43 Trolley Lane Westerly RI

SIXTH: Names and addresses of its directors and officers:

(Attach rider if necessary)

Name

Office

Address (including number, street, zip code)

Director

Director

Director

President

Vice President

Secretary

Treasurer

Giorgio S Gencarelli

Marie Gencarelli

" "

Giorgio S Gencarelli

43 Trolley Lane Westerly

" "

" "

" "

SEVENTH: Number of Shares authorized:

No. of Shares

Class

Series

Par Value
or statement that
shares are without
par value

400

PAID

JUL 16 1992

EIGHTH: Number of Shares issued:

No. of Shares

Class

Series

Par Value
or statement that
shares are without
par value

400

SECY OF STATE

Dated 7-13 1992

Giorgio S Gencarelli + Sons Inc

(Name of Corporation)

By Giorgio S Gencarelli

Title President

(Report must be signed by an officer)

Filing Fee \$15.00 ✓

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID.....0038055..... Annual Report for the year 1990.....

FIRST: The name of the corporation is.....GIORGIO S. GENCARELLI & SONS, INC.....

SECOND: It is incorporated under the laws of.....Rhode Island.....

THIRD: Character of business, briefly stated, is.....to perform masonry and construction
work, including, but not limited to, laying cement blocks, bricks, stones,
cement floors, tile and stucco.....

FOURTH: If foreign corporation, address of its principal office.....

FIFTH: Business address in Rhode Island.....43 Trolly Lane, Westerly, R.I.....

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
Giorgio S. Gencarelli	Director	43 Trolly Lane, Westerly, R.I. 02891
Maria Gencarelli	Director	43 Trolly Lane, Westerly, R.I. 02891
	Director	
Giorgio S. Gencarelli	President	same as above
Maria Gencarelli	Vice President	same as above
Maria Gencarelli	Secretary	same as above
Giorgio S. Gencarelli	Treasurer	same as above

SEVENTH: Number of Shares authorized:

No. of Shares Class

400

Series

Par Value
or statement that
shares are without
par value

PAID

EIGHTH: Number of Shares issued:

No. of Shares Class

400

FEB 10 1991
SEC'y. OF STATE
Series

Par Value
or statement that
shares are without
par value

Dated.....January 31..... 19 90.....

(Report must be signed by an officer)

Giorgio S. Gencarelli & Sons, Inc.
(Name of Corporation)

By.....Giorgio S. Gencarelli.....
Title.....Giorgio S. Gencarelli, President.....

Filing Fee \$15.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

D. P.

Corporate ID 0038065 Annual Report for the year 1989

FIRST: The name of the corporation is GIORGIO S. GENCARELLI & SONS, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is to perform masonry and construction work, including, but not limited to, laying cement blocks, bricks, stones, cement floors, tile and stucco.

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 46 George Street, Westerly, R.I. 02891

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
	Director	
	Director	
	Director	
Giorgio S. Gencarelli	President	46 George Street, Westerly, R.I. 02891
MARIA Gencarelli	Vice President	(same as above)
MARIA Gencarelli	Secretary	(same as above)
Giorgio S. Gencarelli	Treasurer	(same as above)

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series
400		

Par Value
or statement that
shares are without
par value

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series
400		

Par Value
or statement that
shares are without
par value

PAID

FEB 1 1989

REC'D OF STATE

Dated X JANUARY 19 89

Giorgio S. Gencarelli & Sons, Inc.
(Name of Corporation)

By X Giorgio S. Gencarelli
Title President / Treasurer

(Report must be signed by an officer)

Filing Fee \$15.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE, RHODE ISLAND 02903

D.P.

Corporate ID 32045

Annual Report for the year 1988

FIRST: The name of the corporation is GIORGIO S. GENCARELLI & SONS, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is to perform masonry and construction work,
including, but not limited to, laying cement blocks, bricks, stones,
cement floors, tile and stucco.

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 46 George Street, Westerly, R.I. 02891

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name

Office

Address (including number, street, zip code)

Director

Director

Director

Giorgio S. Gencarelli President 46 George Street, Westerly, R.I. 02891

Maria Gencarelli Vice President 46 George Street, Westerly, R.I. 02891

Maria Gencarelli Secretary 46 George Street, Westerly, R.I. 02891

Giorgio S. Gencarelli Treasurer 46 George Street, Westerly, R.I. 02891

SEVENTH: Number of Shares authorized:

No. of Shares 400

Class

Series

Par Value
or statement that
shares are without
par value

PAID

MAY 10 1988

EIGHTH: Number of Shares issued:

No. of Shares 400

Class

Series

Par Value
or statement that
shares are without
par value

SEC'Y. OF STATE

Series

Dated April 19 88

GIORGIO S. GENCARELLI & SONS, INC.

(Name of Corporation)

By Giorgio S. Gencarelli

Giorgio S. Gencarelli

Title President/Treasurer

(Report must be signed by an officer)

Filing Fee \$15.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 38065 Annual Report for the year 1987

FIRST: The name of the corporation is GIORGIO S. GENCARELLI & SONS, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is to perform masonry and construction work,
including, but not limited to, laying cement blocks, bricks, stones,
cement floors, tile and stucco.

FOURTH: If foreign corporation, address of its principal office N/A

FIFTH: Business address in Rhode Island 46 George Street, Westerly, RI 02891

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
	Director	
	Director	
	Director	
<u>Giorgio S. Gencarelli</u>	<u>President</u>	<u>46 George Street, Westerly, RI 02891</u>
<u>Maria Gencarelli</u>	<u>Vice President</u>	<u>46 George Street, Westerly, RI 02891</u>
<u>Maria Gencarelli</u>	<u>Secretary</u>	<u>46 George Street, Westerly, RI 02891</u>
<u>Giorgio S. Gencarelli</u>	<u>Treasurer</u>	<u>46 George Street, Westerly, RI 02891</u>

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
<u>400</u>			

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series
<u>400</u>		

PAID

FEB 23 1987

SECY. OF STATE

Par Value
or statement that
shares are without
par value

MAR 30 1987

Dated February 5, 19 87

GIORGIO S. GENCARELLI & SONS, INC.
(Name of Corporation)

By Giorgio S. Gencarelli
Title President/Treasurer

(Report must be signed by an officer)