



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 IN BLACK)

1. Corporate ID No. 58784		2. Name of Corporation TOWNE GLASS & ALUMINUM, INC.			
3. Street Address Principal Business Office 8 ENTERPRISES LANE		City SMITHFIELD	State RI	Zip 02917-02404	
4. Business Phone No. 231-6030		5. State of Incorporation RHODE ISLAND		6. SIC Code 885	
7. Brief Description of the Character of Business Conducted in Rhode Island THE SALE AND INSTALLATION OF GLASS AND ALUMINUM WINDOWS					
8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Michael J. Shea		Vice President Name Ian M. Shea			
Street Address 452 Durfee Hill Road		Street Address 452 Durfee Hill Road			
City Smithfield	State RI	Zip 02917	City Smithfield	State RI	Zip 02917
Secretary Name Michael J. Shea		Treasurer Name Michael J. Shea			
Street Address 452 Durfee Hill Road		Street Address 452 Durfee Hill Road			
City Smithfield	State RI	Zip 02917	City Smithfield	State RI	Zip 02917
9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Michael J. Shea		Director Name Ian M. Shea			
Street Address Same as above		Street Address Same as above			
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) <input type="checkbox"/>					11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
600 COMM NO PAR VALUE			100	common	no par

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



5 8 7 8 4

58784 DBC 01/13/05 03:50:31 PM

File Date 1/25/05

Check No. 2061

By: DA

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

Date

Michael J. Shea

Print or Type Name of Officer

President

Title of Officer

Form 630 12/01



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. 58784		2. Name of Corporation TOWNE GLASS & ALUMINUM, INC.			
3. Street Address Principal Business Office 8 Enterprise Lane			City Smithfield	State RI	Zip 02917
4. Business Phone No. 231-6030		5. State of Incorporation RHODE ISLAND			6. SIC Code 885
7. Brief Description of the Character of Business Conducted in Rhode Island THE SALE AND INSTALLATION OF GLASS AND ALUMINUM WINDOWS					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Michael J. Shea			Vice President Name Michael J. Shea		
Street Address 452 Durfee Hill Road			Street Address 452 Durfee Hill Road		
City Smithfield	State RI	Zip 02919	City Smithfield	State RI	Zip 02917
Secretary Name Michael J. Shea			Treasurer Name Michael J. Shea		
Street Address 452 Durfee Hill Road			Street Address 452 Durfee Hill Road		
City Smithfield	State RI	Zip 02919	City Smithfield	State RI	Zip 02919
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Michael J. Shea			Director Name		
Street Address Same as above			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) <input type="checkbox"/>			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
600 COMM NO PAR VALUE			100	Common	No par

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



* 5 8 7 8 4 *

File Date **1-23-04**
Check No. **1189**
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.

Signature of Officer

MICHAEL J. SHEA

Print or Type Name of Officer

PRESIDENT

Title of Officer

Date



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.

58784

2. Name of Corporation

TOWNE GLASS & ALUMINUM, INC.

3. Street Address Principal Business Office

8 Enterprise Lane

City

Smithfield

State

RI

Zip

02917

4. Business Phone No.

231-6030

5. State of Incorporation

RHODE ISLAND

6. SIC Code

885

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

the sale and installation of glass and aluminum windows and any other lawful purpose

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

President Name

Michael J. Shea

Vice President Name

Michael J. Shea

Street Address

452 Durfee Hill Road

Street Address

452 Durfee Hill Road

City

Chepachet

State

RI

Zip

02814

City

Chepachet

State

RI

Zip

02814

Secretary Name

Michael J. Shea

Treasurer Name

Michael J. Shea

Street Address

452 Durfee Hill Road

Street Address

452 Durfee Hill Road

City

Chepachet

State

RI

Zip

02814

City

Chepachet

State

RI

Zip

02814

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

Director Name

Michael J. Shea

Director Name

Street Address

Same as above

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)

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

600 COMM NO PAR VALUE

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

ISSUED SHARES

Number of Shares

Class/Series

Par Value

100

Common

No par

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



* 5 8 7 8 4 *

File Date: 2-10-03

Check No: 10275

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.

Signature of Officer

MICHAEL J. SHEA

Date

2/7/03

Print or Type Name of Officer

PRES.

Title of Officer



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.

58784

2. Name of Corporation

TOWNE GLASS & ALUMINUM, INC.

3. Street Address Principal Business Office

8 Enterprise Lane

City

Smithfield

State

RI

Zip

02917

4. Business Phone No.

231-6030

5. State of Incorporation

RHODE ISLAND

6. SIC Code

885

7. Brief Description of the Character of Business Conducted in Rhode Island the sale and installation of glass and aluminum windows and any other lawful purpose.

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

President Name

Michael J. Shea

Street Address

452 DURFEE Hill Rd.

City

Chepachet

State

RI

Zip

02814

Vice President Name

Michael J. Shea

Street Address

452 Durfee Hill Rd.

City

Chepachet

State

RI

Zip

02814

Secretary Name

Michael J. Shea

Street Address

452 Durfee Hill Rd.

City

Chepachet

State

RI

Zip

02814

Treasurer Name

Michael J. Shea

Street Address

452 Durfee Hill Rd.

City

Chepachet

State

RI

Zip

02814

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

Director Name

Michael J. Shea

Street Address

452 Durfee Hill Rd.

City

Chepachet

State

RI

Zip

02814

Director Name

Street Address

City

State

Zip

Director Name

Street Address

City

State

Zip

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

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

600 COMM NO PAR VALUE

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

ISSUED SHARES

Number of Shares

Class/Series

Par Value

100

Common

No par

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



* 5 8 7 8 4 *

File Date: 1-7-02

Check No.: 9362

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.

Michael J. Shea 01-02-02
Signature of Officer Date

Michael J. Shea

Print or Type Name of Officer

President

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
401-222-3040



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. **58784** 2. Name of Corporation **TOWNE GLASS & ALUMINUM, INC.**
3. Street Address Principal Business Office City State Zip
8 Enterprise Lane **Smithfield** **RI** **02917**
4. Business Phone No. 5. State of Incorporation 6. SIC Code
231-6030 **RHODE ISLAND** **885**

7. Brief Description of the Character of Business Conducted in Rhode Island **the sale and installation of glass and aluminum windows and any other lawful purpose.**

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

President Name Michael J. Shea			Vice President Name Michael J. Shea		
Street Address 452 Durfee Hill Road			Street Address 452 Durfee Hill Road		
City Chepachet	State RI	Zip 02814	City Chepachet	State RI	Zip 02814
Secretary Name Michael J. Shea			Treasurer Name Michael J. Shea		
Street Address 452 Durfee Hill Road			Street Address 452 Durfee Hill Road		
City Chepachet	State RI	Zip 02814	City Chepachet	State RI	Zip 02814

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

Director Name Michael J. Shea			Director Name		
Street Address Same as above			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)

AUTHORIZED SHARES		
Number of Shares	Class/Series	Par Value
600 SHS COM NO PAR VAL		

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

ISSUED SHARES		
Number of Shares	Class/Series	Par Value
100	Common	No par

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



* 5 8 7 8 4 *

File Date: 1/25/01

Check No. 8578

By: PCR

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.

Michael J. Shea 1-22-01
Signature of Officer Date

Michael J. Shea

Print or Type Name of Officer

President

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 No. **58784** 2. Name of Corporation **TOWNE GLASS & ALUMINUM, INC.**

3. Street Address Principal Business Office

8 Enterprise Lane

City

Smithfield

State

RI

Zip

012917

4. Business Phone No.

231-6030

5. State of Incorporation **RHODE ISLAND**

6. SIC Code **883**

7. Brief Description of the Character of Business Conducted in Rhode Island **the sale and installation of glass and aluminum windows and any other lawful purpose**

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

President Name

Michael J. Shea

Vice President Name

Michael J. Shea

Street Address

452 Durfee Hill Road

Street Address

452 Durfee Hill Road

City

Chepachet

State

RI

Zip

02814

City

Chepachet

State

RI

Zip

02814

Secretary Name

Michael J. Shea

Treasurer Name

Michael J. Shea

Street Address

452 Durfee Hill Road

Street Address

452 Durfee Hill Road

City

Chepachet

State

RI

Zip

02814

City

Chepachet

State

RI

Zip

02814

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

Director Name

Michael J. Shea

Director Name

Street Address

452 Durfee Hill Road

Street Address

City

Chepachet

State

RI

Zip

02814

City

Chepachet

State

RI

Zip

Director Name

Street Address

City

State

Zip

City

State

Zip

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

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

600 SHS COM NO PAR VAL

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

ISSUED SHARES

Number of Shares

Class/Series

Par Value

100

Common

No par

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



* 5 8 7 8 4 *

File Date: 1-19-00

Check No.: 7706

By: AMF

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.

Michael J. Shea 1/18/00
Signature of Officer Date

Michael J. Shea

Print or Type Name of Officer

President

Title of Officer

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. **58784** 2. Name of Corporation **TOWNE GLASS & ALUMINUM, INC.**

3. Street Address Principal Business Office
8 Enterprise Lane City **Smithfield** State **RI** Zip **02917**
4. Business Phone No. **421-6030** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **885**

7. Brief Description of the Character of Business Conducted in Rhode Island **the sale and installation of glass and aluminum windows and any other lawful purpose.**

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

President Name	Vice President Name
Michael J. Shea	Michael J. Shea
Street Address	Street Address
452 Durfee Hill Road	452 Durfee Hill Road
City	City
Chepachet	Chepachet
State	State
RI	RI
Zip	Zip
02814	02814
Secretary Name	Treasurer Name
Michael J. Shea	Michael J. Shea
Street Address	Street Address
452 Durfee Hill Road	452 Durfee Hill Road
City	City
Chepachet	Chepachet
State	State
RI	RI
Zip	Zip
02814	02814

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

Director Name	Director Name
Michael J. Shea	
Street Address	Street Address
452 Durfee Hill Road	
City	City
Chepachet	
State	State
RI	
Zip	Zip
02814	
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
------------------	--------------	-----------

600 SHS COM NO PAR VAL

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

ISSUED SHARES

Number of Shares	Class/Series	Par Value
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100	Common	No par
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This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



File Date: 1/28/99

Check No.: 6745

By: KHO

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 Michael J. Shea Date 1/22/99

Michael J. Shea

Print or Type Name of Officer

President

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. **58784** 2. Name of Corporation **TOWNE GLASS & ALUMINUM, INC.**
3. Street Address Principal Business Office City State Zip
(RT.5) 26 CEDAR SWAMP RD. SMITHFIELD RI 02917-2404
4. Business Phone No. 5. State of Incorporation 6. SIC Code
(401) 231-6030 RHODE ISLAND 0885

7. Brief Description of the Character of Business Conducted in Rhode Island
THE SALE & INSTALLATION OF GLASS & ALUMINUM WINDOWS AND OTHER LAWFUL PURPOSE

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT)

President Name Vice President Name
MICHAEL J. SHEA
Street Address Street Address
452 DUFFEE HILL RD.
City State Zip City State Zip
CHEPACHET RI 02814
Secretary Name Treasurer Name
Street Address Street Address
City State Zip City State Zip

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT)

Director Name Director Name
MICHAEL J. SHEA
Street Address Street Address
452 DUFFEE HILL RD.
City State Zip City State Zip
CHEPACHET RI 02814
Director Name Director Name
Street Address Street Address
City State Zip City State Zip

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

AUTHORIZED SHARES
Number of Shares Class/Series Par Value
600 SHS COM NO PAR VAL

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

ISSUED SHARES
Number of Shares Class/Series Par Value
100 ONE/COMMON STOCK

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



* 5 8 7 8 4 *

File Date: **2/26**
Check No.: **5954**
By: **100**

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.

Michael J. Shea **2-26-98**
Signature of Officer Date
MICHAEL J. SHEA
Print or Type Name of Officer
PRESIDENT
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.

58784

2. Name of Corporation

TOWNE GLASS & ALUMINUM, INC.

3. Street Address Principal Business Office

(RT.5) 26 CEDAR SWAMP ROAD

City

SMITHFIELD

State

RI

Zip

02917-2404

4. Business Phone No.

(401)231-6030

5. State of Incorporation

RHODE ISLAND

6. SIC Code

0885

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

THE SALE AND INSTALLATION OF GLASS & ALUMINUM WINDOWS AND OTHER LAWFUL PURPOSE

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT)

President Name

MICHAEL J. SHEA

Vice President Name

Street Address

452 DURFEE HILL RD.

Street Address

City

CHEPACHET

State

RI

Zip

02814

City

State

Zip

Secretary Name

Treasurer Name

Street Address

Street Address

City

State

Zip

City

State

Zip

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT)

Director Name

MICHAEL J. SHEA

Director Name

Street Address

452 DURFEE HILL RD.

Street Address

City

CHEPACHET

State

RI

Zip

02814

City

State

Zip

Director Name

Director Name

Street Address

Street Address

City

State

Zip

City

State

Zip

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

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

600 SHS COM NO PAR VAL

ISSUED SHARES

Number of Shares

Class/Series

Par Value

100

ONE/COMMON STOCK

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



* 5 8 7 8 4 *

File Date: 2-3-97

Check No.: 5141

By: WP

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

Date

MICHAEL J. SHEA

Print or Type Name of Officer

PRESIDENT

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. 58784		2. NAME OF CORPORATION TOWNE GLASS & ALUMINUM, INC.			
3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE 26 CEDAR SWAMP ROAD, SMITHFIELD, R.I.		CITY SMITHFIELD	STATE R.I.	ZIP CODE 02917-2404	
4. BUSINESS PHONE NO. (401) 231-6030		5. STATE OF INCORPORATION RHODE ISLAND		6. SIC CODE 0885	
7. BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE ISLAND THE SALE AND INSTALLATION OF GLASS & ALUMINUM WINDOWS AND OTHER LAWFUL PURPOSE					
8. NAMES AND ADDRESSES OF THE OFFICERS					
PRESIDENT NAME MICHAEL J. SHEA			VICE PRESIDENT NAME		
STREET ADDRESS 452 DURFEE HILL ROAD			STREET ADDRESS		
CITY CHEPACHET	STATE R.I.	ZIP CODE 02814	CITY	STATE	ZIP CODE
SECRETARY NAME			TREASURER NAME		
STREET ADDRESS			STREET ADDRESS		
CITY	STATE	ZIP CODE	CITY	STATE	ZIP CODE
9. NAMES AND ADDRESSES OF THE DIRECTORS					
DIRECTOR NAME MICHAEL J. SHEA			DIRECTOR NAME		
STREET ADDRESS 452 DURFEE HILL ROAD			STREET ADDRESS		
CITY CHEPACHET	STATE R.I.	ZIP CODE 02814	CITY	STATE	ZIP CODE
DIRECTOR NAME			DIRECTOR NAME		
STREET ADDRESS			STREET ADDRESS		
CITY	STATE	ZIP CODE	CITY	STATE	ZIP CODE
10. SHARES AUTHORIZED AND ISSUED					
AUTHORIZED SHARES			ISSUED SHARES		
NUMBER OF SHARES	CLASS / SERIES	PAR VALUE	NUMBER OF SHARES	CLASS / SERIES	PAR VALUE
600 SHS COM NO PAR VAL			100	ONE/COMMON STOCK	

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.

Signature of Officer

MICHAEL J. SHEA

Print or Type Name of Officer

File Date: 1/9/96
~~JANUARY 5, 1996~~

Check No: 4051

By: KP/CP

For Secretary of State Use Only

Title of Officer

Date
1/9/96

ANNUAL REPORT

Please Type or Print
File Annually - Jan. 1 - March 1
Filing Fee \$50.00
Make Checks Payable to: Secretary of State

JAN 05 1995

By Michael J. Shea

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

0055764

1995

Corporate ID: _____ Annual Report for the year: _____

TOWNE GLASS & ALUMINUM, INC.

Name of Corporation: _____

Business entity organized under the laws of the State of: R.I.

Business Entity is (check one):

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

☒ 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:

THE SALE AND INSTALLATION OF GLASS AND
ALUMINUM WINDOWS AND OTHER LAWFUL PURPOSE

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

26 CEDAR SWAMP ROAD
SMITHFIELD, R.I. 02917-2404

Phone: (401) 231-6030

THE NAMES OF THE OFFICERS ARE:

PRESIDENT	STREET ADDRESS	CITY/STATE	ZIP CODE
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MICHAEL J. SHEA	452 DURFEE HILL RD.	CHEPACHET R.I.	02814
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VICE PRESIDENT	STREET ADDRESS	CITY/STATE	ZIP CODE
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SECRETARY	STREET ADDRESS	CITY/STATE	ZIP CODE
-----------	----------------	------------	----------

TREASURER	STREET ADDRESS	CITY/STATE	ZIP CODE
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THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
------	----------------	------------	----------

MICHAEL J. SHEA	452 DURFEE HILL RD.	CHEPACHET R.I.	02814
-----------------	---------------------	----------------	-------

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
------	----------------	------------	----------

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
------	----------------	------------	----------

NUMBER OF SHARES AUTHORIZED (Rider may be attached)

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

Number of Shares	Class / Series
600	one/ COMMON STOCK

Number of Shares	Class / Series
100	ONE/ COMMON STOCK

Date JANUARY 2, _____, 19 95

By: Michael J. Shea
MICHAEL J. SHEA
PRINT OR TYPE NAME OF OFFICER SIGNING
PRESIDENT
TITLE OF OFFICER SIGNING

Form 31 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.

MICHAEL J. SHEA
26 CEDAR SWAMP ROAD
SMITHFIELD RI 02917-2404

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

Corporate ID: 0058784 Annual Report for the year: 1994
Name of Business Entity: TOWNE GLASS & ALUMINUM, INC.

Business entity organized under the laws of the State of: R.I.

Federal Taxpayer Identification Number: [REDACTED]

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

Phone: (401) 231-6030

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

26 CEDAR SWAMP ROAD

SMITHFIELD, R.I. 02917-2404

Phone: (401) 231-6030

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:

MICHAEL J. SHEA

c/o TOWNE GLASS & ALUMINUM, INC.

26 CEDAR SWAMP RD.

SMITHFIELD, R.I. 02917-2404

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

THE SALE AND INSTALLATION OF GLASS AND

ALUMINUM WINDOWS AND OTHER LAWFUL PURPOSE

Date of Organization: JANUARY 4, 1990

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

THE NAMES OF THE OFFICERS ARE:

<input type="checkbox"/> CHIEF EXECUTIVE OFFICER OR <input type="checkbox"/> PRESIDENT (Check One)	STREET ADDRESS	CITY/STATE	ZIP CODE
MICHAEL J. SHEA	452 DURFEE HILL RD.	CHEPACHET, R.I.	02814
<input type="checkbox"/> CHIEF OPERATING OFFICER OR <input type="checkbox"/> VICE PRESIDENT (Check One)	STREET ADDRESS	CITY/STATE	ZIP CODE
(SAME AS ABOVE)	"	"	"
<input type="checkbox"/> CUSTODIAN OF RECORDS OR <input type="checkbox"/> SECRETARY (Check One)	STREET ADDRESS	CITY/STATE	ZIP CODE
"	"	"	"
<input type="checkbox"/> CHIEF FINANCIAL OFFICER OR <input type="checkbox"/> TREASURER (Check One)	STREET ADDRESS	CITY/STATE	ZIP CODE
"	"	"	"

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
MICHAEL J. SHEA	452 DURFEE HILL RD,	CHEPACHET, R.I.	02814
NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
"	"	"	"
NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
"	"	"	"

NUMBER OF SHARES AUTHORIZED (If Applicable)

NUMBER 600

CLASS ONE

SERIES COMMON STOCK

PAR VALUE OR
WITHOUT PAR

NUMBER OF SHARES ISSUED AND OUTSTANDING (If Applicable)

NUMBER 100

CLASS ONE

SERIES COMMON STOCK

PAR VALUE OR
WITHOUT PAR

Date SEPTEMBER 22, 1994

By:

MICHAEL J. SHEA

PRINT OR TYPE NAME OF OFFICER SIGNING

PRESIDENT

TITLE OF OFFICER SIGNING

Form 91 1/94

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.

FILED

SEP 23 1994

By: dmt#29
3103

Filing Fee \$ 50.00

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

1970 9/13
State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 0058784

Annual Report for the year 1993

FIRST: The name of the corporation is TOWNE GLASS & ALUMINUM, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is the sale and installation of glass and aluminum windows and any other lawful purpose.

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

FIFTH: Business address in Rhode Island 26 Cedar Swamp Road

Smithfield, RI 02917

SIXTH: Names and addresses of its directors and officers:

(Attach rider if necessary)

Name

Office

Address (including number, street, zip code)

Michael J. Shea

Director

452 Durfee Hill Rd., Chepachet, RI 02814

(Same as above)

Director

(Same as above)

"

"

Director

"

"

Michael J. Shea

President

452 Durfee Hill Rd., Chepachet, RI 02814

Michael J. Shea

Vice President

(Same as above)

Michael J. Shea

Secretary

(Same as above)

Michael J. Shea

Treasurer

(Same as above)

SEVENTH: Number of Shares authorized:

No. of Shares

Class

Series

Par Value
or statement that
shares are without
par value

600

One

Paid

Common Stock

EIGHTH: Number of Shares issued:

No. of Shares

Class

Series

Par Value
or statement that
shares are without
par value

100

One

Common Stock

Dated January 19 19 93

TOWNE GLASS & ALUMINUM, INC.

(Name of Corporation)

By

PRESIDENT

(Report must be signed by an officer)

Title

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

9040
72508

Corporate ID 0000724 Annual Report for the year 1992

FIRST: The name of the corporation is TOWNE GLASS & ALUMINUM, INC.

SECOND: It is incorporated under the laws of RHODE ISLAND

THIRD: Character of business, briefly stated, is THE SALE AND INSTALLATION OF GLASS AND
ALUMINUM WINDOWS AND ANY OTHER LAWFUL PURPOSE

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

FIFTH: Business address in Rhode Island 26 CEDAR SWAMP ROAD
SMITHFIELD, R.I. 02917

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

Name	Office	Address (including number, street, zip code)
MICHAEL J. SHEA	Director	452 DURFEE HILL RD, CHEPACHET, R.I. 02814
(SAME AS ABOVE)	Director	(SAME AS ABOVE)
" "	Director	" "
MICHAEL J. SHEA	President	452 DURFEE HILL RD, CHEPACHET, R.I. 02814
MICHAEL J. SHEA	Vice President	(SAME AS ABOVE)
MICHAEL J. SHEA	Secretary	(SAME AS ABOVE)
MICHAEL J. SHEA	Treasurer	(SAME AS ABOVE)

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
600	ONE	PAID	COMMON STOCK

JAN 30 1992

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	ONE		COMMON STOCK

SECY OF STATE

Dated JANUARY 24, 19 92

TOWNE GLASS & ALUMINUM INC.

(Name of Corporation)

By MICHAEL J. SHEA

Title PRESIDENT

Michael J. Shea

by an officer)

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903Corporate ID 0058784 Annual Report for the year 1991FIRST: The name of the corporation is TOWNE GLASS & ALUMINUM, INC.SECOND: It is incorporated under the laws of RHODE ISLANDTHIRD: Character of business, briefly stated, is THE SALE AND INSTALLATION OF GLASS AND
ALUMINUM WINDOWS AND ANY OTHER LAWFUL PURPOSE.

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 26 CEDAR SWAMP ROAD
SMITHFIELD, R.I. 02917

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

Name	Office	Address (including number, street, zip code)
MICHAEL J. SHEA	Director	452 DURFEE HILL RD, CHEPACHET, R.I. 02814
(SAME AS ABOVE)	Director	(SAME AS ABOVE)
" "	Director	" "
MICHAEL J. SHEA	President	452 DURFEE HILL RD, CHEPACHET, R.I. 02814
MICHAEL J. SHEA	Vice President	(SAME AS ABOVE)
MICHAEL J. SHEA	Secretary	(SAME AS ABOVE)
MICHAEL J. SHEA	Treasurer	(SAME AS ABOVE)

SEVENTH: Number of Shares authorized:

No. of Shares	Class
600	ONE

Series

Par Value
or statement that
shares are without
par value

JAN 22 1991

COMMON STOCK

EIGHTH: Number of Shares issued:

No. of Shares	Class
100	ONE

Series

Par Value
or statement that
shares are without
par value

JAN 22 1991

COMMON STOCK

Dated JANUARY 23RD 19 91TOWNE GLASS & ALUMINUM, INC.
(Name of Corporation)By MICHAEL J. SHEATitle PRESIDENT

(Report must be signed by an officer)