



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

Annual Report for the year: 2021
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 STAMP
 JAN 20 2021
 BY *[Signature]*
DS

1. Entity ID Number 68076		2. Exact name of the Corporation VENTURA FENCE CO., INC.			
3. Principal Office Address 121 Ashbrook Drive			City Cranston	State RI	Zip 02921
4. NAICS Code 81 <i>2990</i>		6. Brief description of the character of business conducted in Rhode Island Installation and repair of all fences and any other lawful purpose			
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 Frank L. Ventura			Vice-President Name Frank L. Ventura		
Street Address 121 Ashbrook Drive			Street Address 121 Ashbrook Drive		
City Cranston	State RI	Zip 02921	City Cranston	State RI	Zip 02921
Secretary Name Mary K. Ventura			Treasurer Name Mary K. Ventura		
Street Address 121 Ashbrook Drive			Street Address 121 Ashbrook Drive		
City Cranston	State RI	Zip 02921	City Cranston	State RI	Zip 02921
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name None			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
			500	Common	No Par
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 Frank L. Ventura, President				Date 1/20/21	
Signature of Authorized Representative <i>Frank L. Ventura, Pres</i>			SIGN DOCUMENT HERE		