



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2020

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

FEB 10 2021

BY

020950

1. Entity ID Number 001706275		2. Exact name of the Corporation Griffco Design Build, Inc.			
3. Principal Office Address 1701 Barrett Lakes Blvd Ste. 285			City Kennesaw	State GA	Zip 30144
4. NAICS Code 236115		6. Brief description of the character of business conducted in Rhode Island General Contractor			
5. State of Incorporation Georgia					
7. List ALL officers (names and addresses)					Check the box to indicate an attachment ☐
President Name Scott C Griffin			Vice-President Name		
Street Address 4504 Burnt Hickory Road NW			Street Address		
City Marietta	State GA	Zip 30064	City	State	Zip
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 ☐
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			
This information is currently of record in the Department of State. Changes require an additional filing.		Check the box to indicate an attachment ☐			
		NUMBER OF SHARES 1,000	CLASS/SERIES Common/A	PAR VALUE \$.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 Scott C Griffin				Date 02/04/2021	
Signature of Authorized Representative 					