State of Rhode Island

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.

1. Entity ID Number	2. Exact name of the Corporation		
000983070	AEROSEAL CONTRACTING CORPORATION		
3. Principal Office Address	City	State	Zip
8350 BRISTOL CT SUITE 103	JESSUP	MD	20794
4. NAICS Code: 238990	6. Brief description of the character of business conducted in Rhode Island: CONTRUCTION SERVICES WINDOW AND DOOR REPLACEMENT		
5. State of Incorporation: DELAWARE			

7. List ALL officers (names and addresses) — Check the box to indicate an attachment ☐

President Name: CLAYTON M FISHER			Vice-President Name: CLAYTON V FISHER		
Street Address: 1941 Covewood Lane			Street Address: 27833 Waverly Rd		
City: WOODSTOCK	State: MD	Zip: 21163	City: EASTON	State: MD	Zip: 21601
Secretary Name: JOHN COAKLEY			Treasurer Name:		
Street Address: 2419 Sunset Farm Rd			Street Address:		
City: ELLICOTT CITY	State: MD	Zip: 21042	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

This information is currently of record in the Department of State.

Changes require an additional filing.

10. Shares Issued — Check the box to indicate an attachment ☐

NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
1500	CNP	0

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	Date
JOHN COAKLEY	2 24 21

Signature of Authorized Representative: JMCoakley

FILED

MAR 01 2021

BY WPICN

A.A. 2:35 PM.

MAIL TO:
Division of Business Services
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Phone: (401) 222-3040
Website: www.sos.ri.gov