



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.

 RECEIVED
 R.I. DEPT. OF STATE
 BUS SVCS DIV STAFF

2021 MAR -1 PM 2:33

1. Entity ID Number 000983070		2. Exact name of the Corporation AEROSEAL CONTRACTING CORPORATION			
3. Principal Office Address 8350 BRISTOL CT SUITE 103			City JESSUP	State MD	Zip 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 ELLCOTT 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			10. Shares Issued Check the box to indicate an attachment ☐		
This information is currently of record in the Department of State. Changes require an additional filing.			NUMBER OF SHARES		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 JOHN COAKLEY					Date 2-24-21
Signature of Authorized Representative 					

FILED

MAR 01 2021

 BY WPICK
 A.A. 2:34 PM

 MAIL TO:
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