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
2021 MAR -9 AM 9:44

1. Entity ID Number	2. Exact name of the Corporation
000504609	RCH Roofing Corporation

3. Principal Office Address	City	State	Zip
120 Enterprise Drive	Marshfield	MA	02050

4. NAICS Code	6. Brief description of the character of business conducted in Rhode Island
238900	Commercial Roofing
5. State of Incorporation	
Massachusetts	

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

President Name: Richard C Hollstein			Vice-President Name		
Street Address: 120 Enterprise Drive			Street Address		
City: Marshfield	State: MA	Zip: 02050	City	State	Zip
Secretary Name: Mary M Hollstein			Treasurer Name		
Street Address: 120 Enterprise Drive			Street Address		
City: Marshfield	State: MA	Zip: 02050	City	State	Zip

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

Director Name: Richard C Hollstein			Director Name		
Street Address: 1 Atlantic Street			Street Address		
City: Marshfield	State: MA	Zip: 02050	City	State	Zip
Director Name: Mary M Hollstein			Director Name		
Street Address: 1 Atlantic Street			Street Address		
City: Marshfield	State: MA	Zip: 02050	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.	NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
Changes require an additional filing.	200	PAR	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
Richard C Hollstein	03/08/2021

Signature of Authorized Representative: Richard C Hollstein

FILED
MAR 09 2021
BY EVSTO
A.A. 9:45 A.M.

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

FORM 630 - Revised: 08/2020