



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.

RECEIVED
R.I. DEPT. OF STATE
BUS SVCS DIV
2021 SEP 30 PM 12:15

1. Entity ID Number 000107655		2. Exact name of the Corporation PGT Industries, Inc.										
3. Principal Office Address 1070 Technology Dr		City Nokomis	State FL									
		Zip 34275										
4. NAICS Code 332321	6. Brief description of the character of business conducted in Rhode Island Custom Windows, Doors and Enclosure Systems											
5. State of Incorporation FL												
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐												
President Name Jeffrey T. Jackson		Vice-President Name Deborah Lapinska										
Street Address 1070 Technology Dr		Street Address 1070 Technology Dr										
City Nokomis	State FL	City Nokomis	State FL									
Zip 34275		Zip 34275										
Secretary Name		Treasurer Name Brad West										
Street Address		Street Address 1070 Technology Dr										
City	State	City Nokomis	State FL									
Zip		Zip 34275										
8. List ALL directors (names and addresses) Check the box to indicate an attachment ☐												
Director Name Rodney Hershberger		Director Name										
Street Address 1070 Technology Dr		Street Address										
City Nokomis	State FL	City	State									
Zip 34275		Zip										
Director Name		Director Name										
Street Address		Street Address										
City	State	City	State									
Zip		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.		<table border="1"> <thead> <tr> <th>NUMBER OF SHARES</th> <th>CLASS/SERIES</th> <th>PAR VALUE</th> </tr> </thead> <tbody> <tr> <td>981,000</td> <td>Common</td> <td>.001</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table>		NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	981,000	Common	.001			
NUMBER OF SHARES	CLASS/SERIES	PAR VALUE										
981,000	Common	.001										
Changes require an additional filing.												
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 Kevin Huber		Date 9/7/2021										
Signature of Authorized Representative <i>[Signature]</i>		FILED <i>[Initials]</i>										

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

SEP 30 2021
BY *Ch 18E0A*
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FORM 630 - Revised: 10/2017