RI SOS Filing Number: 202102704390 Date: 9/30/2021 12:19:00 PM

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State of Rhode Island and Providence Plantations

## **Department of State - Business Services Division**

Annual Report for the year: 2018 Corporation

→ Filing period: January 1 - March 1

→ Filing Fee: \$50.00

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→ Penalty: Additional \$25 <ol> <li>Entity ID Number</li> </ol>						<u> </u>	
000107655		2. Exact name of the Corporation PGT Industries, Inc.					
3. Principal Office Address			City		State	Zip	
1070 Technology Dr			Nokomis		FL	34275	
4. NAICS Code  33232  5. State of Incorporation  FL		6. Brief description of the character of business conducted in Rhode Island  Custom Windows, Doors and Enclosure Systems					
7. List ALL officers (names ar	nd addresses)			Chec	k the hay to indi	cate an attachment	
President Name Jeffrey T. Jackson			Vice-President Name  Deborah Lapinska				
Street Address 1070 Technology	Street Address 1070 Technology Dr						
City Nokomis	State FL	<sup>Zıp</sup> 34275	City Nokomis		State FL	<sup>Zip</sup> 34275	
Secretary Name		Treasurer Name Brad West					
Street Address			Street Address 1070 Technology Dr				
City	State	Zip	City Nokomis		State FL	<sup>Zip</sup> 34275	
8. List ALL directors (names	and addresses)				k the box to ind	icate an attachment 🔲	
Director Name Rodney Hersh	nberger		Director Nam	ne			
Street Address 1070 Technology Dr			Street Address				
City Nokomis	State FL	Zip 34275	City		State	Zip	
Director Name			Director Name				
Street Address			Street Address				
City	State	Zip	City		State	Ζıp	
9. Shares Authorized	. Shares Authorized 10. Shares Iss						
This information is currently of record in the Department of State. Changes require an additional filing.		NUMBER OF SHARES			CLASS/SERIES PAR VALUE		
		981,000		Common		.001	
				<u> </u>			
<ol> <li>This report must be executivated, this report must be executivated.</li> </ol>					ooration is in the	hands of a receiver or	
Under penalty of perjury, I statements, and that all sta	declare and affirm (	that I have examin	ed this report,	including any acco	mpanying sch	edules and	
Name of Authorized Represe			Date 7/7/	707)			
Signature of Authorized Repo	resentative				·		
	-FILED						

MAIL TO:

**Division of Business Services** 

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov

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FORM 630 - Revised: 10/2017