



State of Rhode Island and Providence Plantations  
**Department of State - Business Services Division**

**Annual Report for the year: 2017**  
**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 STAMP**  
 R.I. DEPT. OF STATE  
 BUS SVCS DIV  
 2022 JAN -4 PM 12:07

|  |                    |  |                         |                    |  |
|--|--------------------|--|-------------------------|--------------------|--|
| 1. Entity ID Number<br><b>000136218</b>  |                    | 2. Exact name of the Corporation<br><b>Geo-Synthetics, Inc.</b>  |                         |                    |  |
| 3. Principal Office Address<br><b>2401 Pewaukee Road</b>   |                    |  | City<br><b>Waukesha</b> | State<br><b>WI</b> | Zip<br><b>53188</b>  |
| 4. NAICS Code<br><b>238900</b>   |                    | 6. Brief description of the character of business conducted in Rhode Island<br><b>The distribution and installation of erosion control and liner materials</b> |                         |                    |  |
| 5. State of Incorporation<br><b>WI</b>   |                    |  |                         |                    |  |
| 7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>   |                    |  |                         |                    |  |
| President Name<br><b>Patricia Groh</b>   |                    |  | Vice-President Name     |                    |  |
| Street Address<br><b>W297N3360 Woodridge Circle</b>  |                    |  | Street Address          |                    |  |
| City<br><b>Pewaukee</b>  | State<br><b>WI</b> | Zip<br><b>53072</b>  | City                    | State              | Zip  |
| Secretary Name   |                    |  | Treasurer Name          |                    |  |
| Street Address   |                    |  | Street Address          |                    |  |
| City   | State              | Zip  | City                    | State              | Zip  |
| 8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>  |                    |  |                         |                    |  |
| 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 <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>  |                         |                    |  |
| This Information is currently of record in the Department of State.<br><br>Changes require an additional filing.   |                    | NUMBER OF SHARES   |                         | CLASS/SERIES       | PAR VALUE  |
|  |                    | <b>9000</b>  |                         | <b>CWP</b>         | <b>.01</b>   |
| 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.<br><i>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.</i> |                    |  |                         |                    |  |
| Name of Authorized Representative<br><b>Patricia Groh</b>  |                    |  |                         |                    | Date<br><b>11-17-2021</b>  |
| Signature of Authorized Representative<br><i>Patricia Groh</i>   |                    |  |                         |                    | SIGN DOCUMENT HERE<br><b>FILED</b><br><b>IAN 04 2022</b><br><i>EV G.S.M.D.W. A.A. 12:12 P.M.</i> |

MAIL TO:  
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