



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2022
Corporation

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

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|---|-------------|--|---|-----------------|--------------|
| 1. Entity ID Number 000092972 | | 2. Exact name of the Corporation G.D. CONSTRUCTION, ROOFING & SIDING, INC. | | | |
| 3. Principal Office Address 1625 Victory Highway | | | City Coventry | State RI | Zip 02827 |
| 4. NAICS Code 238160 | | 6. Brief description of the character of business conducted in Rhode Island Roofing and siding for commercial and residential buildings | | | |
| 5. State of Incorporation Rhode Island | | | | | |
| 7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/> | | | | | |
| President Name Germain L. Duquette | | | Vice-President Name | | |
| Street Address 1625 Victory Highway | | | Street Address | | |
| City Coventry | State RI | Zip 02827 | City | State | Zip |
| Secretary Name Germain L. Duquette | | | Treasurer Name Germain L. Duquette | | |
| Street Address 1625 Victory Highway | | | Street Address 1625 Victory Highway | | |
| City Coventry | State RI | Zip 02827 | City Coventry | State RI | Zip 02827 |
| 8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/> | | | | | |
| Director Name Germain L. Duquette | | | Director Name | | |
| Street Address 1625 Victory Highway | | | Street Address | | |
| City Coventry | State RI | Zip 02827 | 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 <input type="checkbox"/> | | |
| This information is currently of record in the Department of State. Changes require an additional filing. | | | NUMBER OF SHARES | | |
| | | | CLASS/SERIES | | PAR VALUE |
| | | | 100 | Common | No Par Value |
| | | | | | |
| 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 Germain L. Duquette, President | | | | Date 2/23/22 | |
| Signature of Authorized Representative | | | | | |

MAIL TO:

Division of Business Services

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