

State of Rhode Island

Department of State - Business Services Division

Annual Report for the year:	
Corporation	-

2022

MAY 0 3 2022 2

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

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

1. Cathy ID Alverbas	2 5		O									
1. Entity ID Number	2. Exact name of the Corporation DWG Associates, Ltd.											
000138540	ישט ן	G ASSC	ociates, i	₋ta.								
3. Principal Office Address						_	State		Zip			
576 Metacom Avenue, Suite 8-A Rear				City Bristol				RI		02809		
					DO (0	l		.1	OLOGO			
4. NAICS Code	6. Brief description of the character				r of business conducted in Rhode Island							
541612 - Human Resources												
Management and advectory consulting												
5. State of Incorporation	Management and advocacy consulting											
Rhode Island												
7 List ALL officers (names and addresses) Check the box to indicate an attachment												
45 44 44	Check the box to indicate an attachment Vice-President Name Develor W. Coblington											
President Name Douglas W. Gablinske				Vice-President Name Douglas W. Gablinske								
Street Address 576 Materials Avenue Cuits C A Deser					Charl Address							
576 Metacom	ı Avenue,	Suite 8	-A Rear	Street Address 576 Metacom Avenue, Suite 8-A Rear								
City Bristol	State DI	Zip		City			State		Tzio			
City Bristol	State RI	الماء ا	02809	City	Bristol		State	RI	Zip	02809		
Secretary Name Douglas W.G.	<u></u>			Trace	ime Nama		<u> </u>		ــــــــــــــــــــــــــــــــــــــ			
Secretary Name Douglas W. Gablinske Treasurer Name Douglas W. Gablinske												
Street Address 576 Manage A				Street	Address							
576 Metacom A	ivenue, Su	ite 8-A R	lear	3000	Muuless	576 Metacom A	venue	, Suite 8	-AR	ear		
City Bristol	State DI	. 7in		City			Ciata		Ti.			
Bristol	State RI	Zip	02809	City	Bristol		State	RI	Zip	02809		
8 List ALL directors (names and ad	(denoces)			1		Charlet	a bass 14	Indianta	22.24			
Director Name				Dienet	or Name		ie dox ii	noicate	an atu	achment 🗆		
Director Name Douglas W. Gablinske Director Name NONE												
Street Address 576 Matagam Avanua Suita 9 A Daga			Street Address									
Street Address 576 Metacom Avenue, Suite 8-A Rear Street Address												
City Bristol	State D	Zip		City			State		Zip			
ਾਂy Bristol	State R	I E'P	02809	City			State		Zip			
Director Name NONE				Dimet	v Alama	· · · · · · · · · · · · · · · · · · ·	L					
NONE NONE				Director Name NONE								
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,		-"		""			State		24			
9 Shares Authorized	1	10	Shares Issue	<u></u>		Check th	e boy to	Indicate	an att	achment 🔲		
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Department of State.			45	<u> </u>		Common	1		No			
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Changes require an additional filing.								1				
11 This report must be executed or	n behalf of th	e corporat	ion by an au	thorized	represent	tative. If the corpora	ition is i	n the hand	ds of a	receiver or		
trustee, this report must be execute												
Under penalty of perjury, I declar						uding any accomp	anying	schedule	es and	<i>!</i>		
statements, and that all statements contained herein are true and correct.												
Name of Authorized Representative									199			
Douglas W. Gablinske		, , ,	1/2					411	17/	1h		
Signature of Authorized Representative//												
L	W 1.	///		_				•				

MAIL TO:

Division of Business Services

146 W River Street Providence, Rhode Island 02904-2615 Phone: (40 1292-3040

Website: www.sos.n.gcv