



State of Rhode Island  
**Department of State - Business Services Division**

**Annual Report for the year:** 2023  
**Corporation**

- Filing period: February 1 - May 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by May 31.

**FILED**  
 APR 19 2023  
 BY H3  
[Signature]

1. Entity ID Number <b>001743073</b>		2. Exact name of the Corporation <b>Wetherbee Architecture, PC</b>			
3. Principal Office Address <b>35 Wood Street</b>			City <b>Providence</b>	State <b>RI</b>	Zip <b>02909</b>
4. NAICS Code <b>541310</b>		6. Brief description of the character of business conducted in Rhode Island  <b>The practice of architecture</b>			
5. State of Incorporation <b>Rhode Island</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 <b>Emily Wetherbee</b>			Vice-President Name <b>None</b>		
Street Address <b>35 Wood Street</b>			Street Address		
City <b>Providence</b>	State <b>RI</b>	Zip <b>02909</b>	City	State	Zip
Secretary Name <b>Emily Wetherbee</b>			Treasurer Name <b>Emily Wetherbee</b>		
Street Address <b>35 Wood Street</b>			Street Address <b>35 Wood Street</b>		
City <b>Providence</b>	State <b>RI</b>	Zip <b>02909</b>	City <b>Providence</b>	State <b>RI</b>	Zip <b>02909</b>
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name <b>None</b>			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.  Changes require an additional filing.			NUMBER OF SHARES		CLASS/SERIES
			<b>100</b>	<b>Common</b>	<b>\$0.01 per share</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. <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 <b>Emily Wetherbee</b>					Date <b>4/11/2023</b>
Signature of Authorized Representative 					