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State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2023 *Amended*
Corporation

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

RECEIVED
R.I. DEPT. OF STATE
BUS SVCS DIV

2023 SEP 21 P 1:36

1. Entity ID Number 000992099		2. Exact name of the Corporation ROEDERS OF AMERICA, INC.			
3. Principal Office Address 711 EXECUTIVE BLVD. SUITE 0			City VALLEY COTTAGE	State NY	Zip 10989
4. NAICS Code 454390		6. Brief description of the character of business conducted in Rhode Island MACHINERY			
5. State of Incorporation NY					
7. List ALL officers (names and addresses) Check the box to indicate an attachment					
President Name VICTOR R. PFISTER			Vice-President Name		
Street Address 99 DEMAREST MILL RD.			Street Address		
City WEST NYACK	State NY	Zip 10994	City	State	Zip
Secretary Name			Treasurer Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. List ALL directors (names and addresses) Check the box to indicate an attachment					
Director Name MATTHEW BYERS			Director Name		
Street Address 7141 NANTUCKET DRIVE SW			Street Address		
City BYRON CENTER	State MI	Zip 49315	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			
This information is currently of record in the Department of State. Changes require an additional filing.		NUMBER OF SHARES		CLASS/SERIES	PAR VALUE
		200		COMMON	1.01
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 <i>(Signature)</i>					Date 9.25.23
Signature of Authorized Representative VICTOR R PFISTER					

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

SEP 21 2023
BY ml



State of Rhode Island
Department of State | Office of the Secretary of State
Gregg M. Amore, *Secretary of State*

I, GREGG M. AMORE, Secretary of State of the State of Rhode Island,
hereby certify that this document, duly executed in accordance with the provisions
of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this
office on this day:

September 23, 2023 01:36 PM

A handwritten signature in black ink that reads "Gregg M. Amore".

Gregg M. Amore
Secretary of State

