| State of Rhode IslandFee: \$50.0Office of the Secretary of State |
|---|
| Division Of Business Services |
| 148 W. River Street |
| Providence RI 02904-2615 |
| (401) 222-3040 |
| Foreign Business Corporation Annual Report |
| Filing Period: February 1 - May 1 |
| In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00. |
| ANNUAL REPORT YEAR - ENTER THE CURRENT YEAR 2024 : <u>2024</u> |
| 1. Corporate ID No. 000066089 |
| 2. Name of Corporation Chandler Architectural Products, Inc. |
| 3. Street Address Principal Business Office: |
| No. and Street: 255 INTERSTATE DRIVE |
| City or Town: WEST SPRINGFIELD State: MA Zip: 01089 Country: USA |
| 4. Business Phone No. |
| 5. State of Incorporation |
| State: <u>MA</u> |
| NAICS CODE |
| Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online. |
| <u>238150</u> |
| 6. Brief Description of the Character of Business Conducted in Rhode Island |
| COMMERCIAL CONTRACTOR FOR WINDOWS ALUMINUM ENTRANCES STORE |
| FRONTS CURTAIN |
| WALLS GLASS AND GLAZING |
| 7. Names and Addresses of the Officers and Directors: |
| All officers and directors must be listed. |

L

| Title | Individual Name First, Middle, Last, Suffix | Address Address, City or Town, State, Zip Code, Country |
|-----------|--|--|
| PRESIDENT | JEREMY S. MCLAIN | 620 S. QUARTER ROAD RUSSELL, MA 01071 USA |
| TREASURER | PAUL C. PATRUNO | 61 ROSEWOOD LN. ATTLEBORO FALLS, MA 02763 USA |
| SECRETARY | KIMBERLY A. MELE | 10 WEBSTER LANE WILBRAHAM, MA 01095 USA |
| CEO | ANDREW P. MELE | 10 WEBSTER LANE WILBRAHAM, MA 01095 USA |
| CFO | PAUL C. PATRUNO | 61 ROSEWOOD LN. ATTLEBORO FALLS, MA 02763 USA |
| DIRECTOR | KIMBERLY A. MELE | 10 WEBSTER LANE WILBRAHAM, MA 01095 USA |

8. Shares Authorized and Issued

| | | | | Total Issued |
|----------------|-----------------|---------------|------------------|--------------|
| Class of Stock | Series of Stock | Par Value Per | | and |
| | | Share | Total Authorized | Outstanding |
| | | | Shares | Num of |
| | | | Number of Shares | Shares |
| CNP | | \$0.0000 | 100.00 | 100 |

9. 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.

Signed this 5 Day of February, 2024 at 10:37:12 AM. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By PAUL C. PATRUNO

Signature of Authorized Representative of the Corporation

Form No. 630 Revised 09/07

© 2007 - 2024 State of Rhode Island All Rights Reserved