



State of Rhode Island  
Department of State - Business Services Division

FEB 14 2024

10505

Annual Report for the year:

Corporation

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

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

1. Entity ID Number 145225		2. Exact name of the Corporation PROGRESSIVE DISPLAYS, INC.							
3. Principal Office Address 605 Main Street		City Warren	State RI Zip 02885-0000						
4. NAICS Code 238390	6. Brief description of the character of business conducted in Rhode Island the fabrication and distribution of point of purchase displays								
5. State of Incorporation RI									
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>									
President Tara K. Thibaudeau		Vice President Name Charles A. Thibaudeau, Jr.							
Street Address 605 Main Street		Street Address 605 Main Street							
City Warren	State RI Zip 02885	City Warren	State RI Zip 02885						
Secretary Tara K. Thibaudeau		Treasurer Name Tara K. Thibaudeau							
Street Address 605 Main Street		Street Address 605 Main Street							
City Warren	State RI Zip 02885	City Warren	State RI Zip 02885						
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>									
Director Tara K. Thibaudeau		Director Name none							
Street Address 605 Main Street		Street Address none							
City Warren	State RI Zip 02885	City none	State none Zip none						
Director none		Director Name none							
Street Address none		Street Address none							
City none	State none Zip none	City none	State none Zip none						
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.		<table border="1"> <thead> <tr> <th>NUMBER OF SHARES</th> <th>CLASS/SERIES</th> <th>PAR VALUE</th> </tr> </thead> <tbody> <tr> <td>100</td> <td>Common</td> <td>No Par</td> </tr> </tbody> </table>		NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	100	Common	No Par
NUMBER OF SHARES	CLASS/SERIES	PAR VALUE							
100	Common	No Par							
Changes require an additional filing.									
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. <b>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.</b>									
Name of Authorized Representative Tara K. Thibaudeau President			Date 1/04/2024						
Signature of Authorized Representative <i>Tara K Thibaudeau</i>									

## MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

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Website: www.sos.ri.gov