

State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2025
Corporation

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

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

DEC 23 2024

10083 DV

1. Entity ID Number 000830971		2. Exact name of the Corporation WEEKES CONSTRUCTION, INC.			
3. Principal Office Address P. O. BOX 17977		City GREENVILLE		State SC	Zip 29606
4. NAICS Code 236200		6. Brief description of the character of business conducted in Rhode Island CONSTRUCTION			
5. State of Incorporation SC					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name CHANDLER WEEKES			Vice-President Name HUNTER B WEEKES		
Street Address 228 BYRD BLVD			Street Address 5 LONGTAIL COURT		
City GREENVILLE	State SC	Zip 29605	City GREENVILLE	State SC	Zip 29607
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 <input type="checkbox"/>					
Director Name			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 This information is currently of record in the Department of State. Changes require an additional filing.		10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>			
		NUMBER OF SHARES 7328		CLASS/SERIES COMMON	PAR VALUE
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					Date 12/16/2024
Signature of Authorized Representative CHANDLER WEEKES					

MAIL TO:

Division of Business Services

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

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