

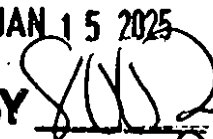
State of Rhode Island

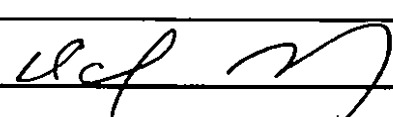
Department of State - Business Services Division

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.

FILED

JAN 15 2025

BY 

1. Entry ID Number 000133585		2. Exact name of the Corporation DAVID GOLDING CONSTRUCTION, INC.			
3. Principal Office Address 30 TROWBRIDGE DRIVE			City NORTH KINGSTOWN	State RI	Zip 02852
4. NAICS Code 236110		6. Brief description of the character of business conducted in Rhode Island			
5. State of Incorporation RI		RESIDENTIAL CONSTRUCTION			
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐					
President Name DAVID G GOLDING			Vice-President Name DAVID G GOLDING		
Street Address 30 TROWBRIDGE DRIVE			Street Address 30 TROWBRIDGE DRIVE		
City NORTH KINGSTOWN	State RI	Zip 02852	City NORTH KINGSTOWN	State RI	Zip 02852
Secretary Name DAVID G GOLDING			Treasurer Name DAVID G GOLDING		
Street Address 30 TROWBRIDGE DRIVE			Street Address 30 TROWBRIDGE DRIVE		
City NORTH KINGSTOWN	State RI	Zip 02852	City NORTH KINGSTOWN	State RI	Zip 02852
8. List ALL directors (names and addresses) Check the box to indicate an attachment ☐					
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 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 1000	CLASS/SERIES COMMON	PAR VALUE 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 David G. Golding					Date 12/15/24
Signature of Authorized Representative DAVID G GOLDING 					

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040