State of Rhode IslandFee: \$50.00Office of the Secretary of State
Division Of Business Services
148 W. River Street
Providence RI 02904-2615
<b>1636</b> (401) 222-3040
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 <b>2025</b> : <u>2025</u>
1. Corporate ID No. 000113539
2. Name of Corporation COMFORT ZONE INC
3. Street Address Principal Business Office:
No. and Street: 29 LAWTON FOSTER RD S
City or Town: <u>HOPKINTON</u> State: <u>RI</u> Zip: <u>02833-1109</u> Country: <u>USA</u>
4. Business Phone No.
<u>401-377-6012</u>
5. State of Incorporation
State: <u>RI</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>238220</u>
6. Brief Description of the Character of Business Conducted in Rhode Island
HEATING AND AIR CONDITION SALES AND SERVICE AND INSTALLATION
7. Names and Addresses of the Officers and Directors:
All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country	
PRESIDENT	STEPHEN JOHN REINHART	29 LAWTON FOSTER RD.S. HOPKINTON, RI 02833 USA	
TREASURER	LISA JEAN REINHART	29 LAWTON FOSTER RD S HOPKINTON, RI 02833 USA	
SECRETARY	LISA JEAN REINHART	29 LAWTON FOSTER RD.S. HOPKINTON, RI 02833-1109 USA	
VICE PRESIDENT	DENNIS M PELLETIER JR	14 WEST ST ASHAWAY, RI 02804 USA	

## 8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares Number of Shares	Total Issued and Outstanding <i>Num of</i> <i>Shares</i>
STK		\$0.0000	8,000.00	0

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 6 Day of February, 2025 at 10:29:05 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 LISA REINHART

Signature of Authorized Representative of the Corporation

Form No. 630 Revised 09/07

© 2007 - 2025 State of Rhode Island All Rights Reserved