

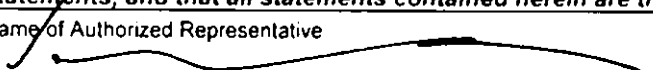
State of Rhode Island
 Department of State - Business Services Division

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

MAR 19 2025
 BY 274 *2*

1 Entity ID Number 000163192		2 Exact name of the Corporation JEFFERY'S PAINTING, INC.			
3 Principal Office Address 20 D'AMICO LANE			City GLOCESTER	State RI	Zip 02814
4 NAICS Code 238300		6 Brief description of the character of business conducted in Rhode Island PAINTING			
5 State of Incorporation RI					
7 List ALL officers (names and addresses) Check the box to indicate an attachment					
President Name JEFFERY ATHERTON			Vice-President Name		
Street Address 20 D'AMICO LANE			Street Address		
City GLOCESTER	State RI	Zip 02814	City	State	Zip
Secretary Name JEFFERY ATHERTON			Treasurer Name JEFFERY ATHERTON		
Street Address 20 D'AMICO LANE			Street Address 20 D'AMICO LANE		
City GLOCESTER	State RI	Zip 02814	City GLOCESTER	State RI	Zip 02814
8 List ALL directors (names and addresses) Check the box to indicate an attachment					
Director Name JEFFERY ATHERTON			Director Name		
Street Address 20 D'AMICO LANE			Street Address		
City GLOCESTER	State RI	Zip 02814	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9 Shares Authorized		10 Shares Issued 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		CLASS/SERIALS	PAR VALUE
		100		CWP	1
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 3-16-25	
Signature of Authorized Representative JEFFERY ATHERTON					

MAIL TO:
 Division of Business Services
 148 W River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040
 Website: www.sos.ri.gov