



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.

RECEIVED
DEPT. OF
BUS. SVCS.

1. Entity ID Number 035067		2. Exact name of the Corporation GREENVILLE INSULATION INC	
3. Principal Office Address 305 PUTNAM PIKE		City SMITHFIELD	State RI
		Zip 02917	
4. NAICS Code 238310	6. Brief description of the character of business conducted in Rhode Island INSTALL INSULATION		
5. State of Incorporation R.I. 7/3/85			
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
President Name ANTHONY J GARGARO JR		Vice-President Name	
Street Address 6 EAST WARD DRIVE		Street Address	
City LINCOLN	State RI	Zip 02865	
Secretary Name ANTHONY J GARGARO JR		Treasurer Name ANTHONY J GARGARO JR	
Street Address 6 EAST WARD DRIVE		Street Address 6 EAST WARD DRIVE	
City LINCOLN	State RI	Zip 02865	
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
Director Name ANTHONY J GARGARO JR		Director Name	
Street Address 6 EAST WARD DRIVE		Street Address	
City LINCOLN	State RI	Zip 02865	
Director Name		Director Name	
Street Address		Street Address	
City	State	Zip	
9. Shares Authorized Check the box to indicate an attachment <input type="checkbox"/>			
This information is currently of record in the Department of State.		10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>	
Changes require an additional filing.		NUMBER OF SHARES 100	CLASS/SERIES COMMON
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 ANTHONY J GARGARO JR		Date 2/2/2025	
Signature of Authorized Representative			

FILED
JUN 30 2025
BY 13334
EC