



**State of Rhode Island**  
**Department of State - Business Services Division**

Annual Report for the year: **2022**

**Corporation**

- Filing period: February 1 - May 1  
 → Filing Fee: \$50.00  
 → Penalty: Additional \$25.00 fee if form is not filed by May 31.

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 FOR  
 DEPT. OF STATE  
 RI SOS ONLY

1. Entity ID Number <b>000140875</b>		2. Exact name of the Corporation <b>Scott Reynolds Painting, Inc</b>												
3. Principal Office Address <b>16 Armory Drive</b>			City <b>Warwick</b>		State <b>RI</b>									
			Zip <b>02889</b>											
4. NAICS Code <b>238320</b>		6. Brief description of the character of business conducted in Rhode Island <b>House Painting</b>												
5. State of Incorporation <b>RI</b>														
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>														
President Name <b>Scott J Reynolds</b>			Vice-President Name <b>none</b>											
Street Address <b>16 Armory Drive</b>			Street Address											
City <b>Warwick</b>	State <b>RI</b>	Zip <b>02889</b>	City	State	Zip									
Secretary Name <b>none</b>			Treasurer Name <b>none</b>											
Street Address			Street Address											
City	State	Zip	City	State	Zip									
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>														
Director Name <b>none</b>			Director Name <b>none</b>											
Street Address			Street Address											
City	State	Zip	City	State	Zip									
Director Name <b>none</b>			Director Name <b>none</b>											
Street Address			Street Address											
City	State	Zip	City	State	Zip									
9. Shares Authorized		10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>												
This information is currently of record in the Department of State.  Changes require an additional filing.		<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: center;">NUMBER OF SHARES</th> <th style="text-align: center;">CLASS/SERIES</th> <th style="text-align: center;">PAR VALUE</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;"><b>100</b></td> <td style="text-align: center;"><b>common</b></td> <td style="text-align: center;"><b>no par value</b></td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>				NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	<b>100</b>	<b>common</b>	<b>no par value</b>			
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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. <b>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.</b>														
Name of Authorized Representative <b>Scott J Reynolds</b>				Date <b>9/15/25</b>										
Signature of Authorized Representative														

FILED  
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