

**2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F14000004610

**Entity Name:** GILBANE DEVELOPMENT COMPANY

**Current Principal Place of Business:**

7 JACKSON WALKWAY  
PROVIDENCE, RI 02903

**Current Mailing Address:**

7 JACKSON WALKWAY  
PROVIDENCE, RI 02903 US

**FEI Number: 05-0346873**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name CHOQUETTE, PAUL J. JR.  
Address 7 JACKSON WALKWAY  
City-State-Zip: PROVIDENCE RI 02903

Title CEO/DIRECTOR  
Name GILBANE, ROBERT V. JR.  
Address 7 JACKSON WALKWAY  
City-State-Zip: PROVIDENCE RI 02903

Title DIRECTOR  
Name GILBANE, THOMAS F. JR.  
Address 7 JACKSON WALKWAY  
City-State-Zip: PROVIDENCE RI 02903

Title TREASURER  
Name LAWRENCE, MATTHEW P.  
Address 7 JACKSON WALKWAY  
City-State-Zip: PROVIDENCE RI 02903

Title SECRETARY  
Name STOLMEIER, MOLLY  
Address 7 JACKSON WALKWAY  
City-State-Zip: PROVIDENCE RI 02903

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: LAWRENCE , MATTHEW P.**

**TREASURER**

**04/06/2017**

Electronic Signature of Signing Officer/Director Detail

Date