



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State

Matthew A. Brown, Secretary of State

Corporations Division
100 North Main Street
Providence, RI 02903-1335
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

Form with multiple sections: 1. Corporate ID No. 296; 2. Name of Corporation ACCESS DEVELOPMENT CORPORATION; 3. Street Address Principal Business Office 10 Buck Thorne Avenue; 4. Business Phone No. 434-3465; 5. State of Incorporation Rhode Island; 6. SIC Code 7682; 7. Brief Description of the Character of Business Conducted in Rhode Island To provide architectural design services; 8. NAMES AND ADDRESSES OF THE OFFICERS: President Name Joseph DelVecchio; Vice President Name None; Secretary Name Christina A. S. DelVecchio; Treasurer Name Christina A. S. DelVecchio; 9. NAMES AND ADDRESSES OF THE DIRECTORS: Director Name Joseph DelVecchio; Director Name None; 10. SHARES AUTHORIZED 100 Common No Par Value; 11. SHARES ISSUED 50 Common No Par Value.

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, 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.

Signature of Officer: Joseph DelVecchio; Date: Feb 15, 2005; Print or Type Name of Officer: Joseph DelVecchio, President

File Date: 2-22-05; Check No.: 3082; By: [Signature]; FOR SECRETARY OF STATE USE ONLY

Title of Officer



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

Filing Period: January 1 - March 1 • Filing Fee: \$50.00
(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No 296		2. Name of Corporation ACCESS DEVELOPMENT CORPORATION			
3. Street Address Principal Business Office 10 Buck Thorne Avenue			City East Providence	State RI	Zip 02915
4. Business Phone No. (401) 434-3465		5. State of Incorporation RHODE ISLAND			6. SIC Code 7682
7. Brief Description of the Character of Business Conducted in Rhode Island TO PROVIDE ARCHITECTURAL DESIGN SERVICES.					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Christina A. S. Delvecchio			Vice President Name None		
Street Address 10 Buck Thorne Avenue			Street Address		
City East Providence	State RI	Zip 02915	City	State	Zip
Secretary Name Christina A. S. Delvecchio			Treasurer Name Christina A. S. Delvecchio		
Street Address 10 Buck Thorne Avenue			Street Address 10 Buck Thorne Avenue		
City East Providence	State RI	Zip 02915	City East Providence	State RI	Zip 02915
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Christina A. S. Delvecchio			Director Name NONE		
Street Address 10 Buck Thorne Avenue			Street Address		
City East Providence	State RI	Zip 02915	City	State	Zip
Director Name NONE			Director Name NONE		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
100 NO PAR VALUE			50	Common	No Par Value

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 2 9 6 *

File Date 2-2-04
Check No. 3036
By: [Signature]
FOR SECRETARY OF STATE USE ONLY

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.

Christina A. S. Delvecchio 1/28/04
Signature of Officer Date
Christina A. S. Delvecchio
Print or Type Name of Officer
President
Title of Officer



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. **296** 2. Name of Corporation **ACCESS DEVELOPMENT CORPORATION**
 3. Street Address Principal Business Office **10 BUCK THORNE AVENUE** City **RIVERSIDE** State **RI** Zip **02915**
 4. Business Phone No. **434-3465** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **7682**
 7. Brief Description of the Character of Business Conducted in Rhode Island **ARCHITECTS**

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name CHRISTINA A. S. DELVECCHIO	Vice President Name NONE
Street Address 10 BUCK THORNE AVENUE	Street Address
City RIVERSIDE State RI Zip 02915	City State Zip
Secretary Name CHRISTINA A. S. DELVECCHIO	Treasurer Name CHRISTINA A. S. DELVECCHIO
Street Address 10 BUCK THORNE AVENUE	Street Address 10 BUCK THORNE AVENUE
City RIVERSIDE State RI Zip 02915	City RIVERSIDE State RI Zip 02915

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name CHRISTINA A. S. DELVECCHIO	Director Name NONE
Street Address 10 BUCK THORNE AVENUE	Street Address
City RIVERSIDE State RI Zip 02915	City State Zip
Director Name NONE	Director Name NONE
Street Address	Street Address
City State Zip	City State Zip

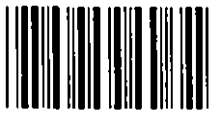
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES	Class/Series	Par Value
100 NO PAR VALUE		

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES	Class/Series	Par Value
50	COMMON	NO PAR VALUE

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 2 9 6 *

File Date: 2/13/03
 Check No.: 2995
 By: [Signature]

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.

Christina ASDelVecchio 2/8/03
 Signature of Officer Date

CHRISTINA A. S. DELVECCHIO, President
 Print or Type Name of Officer



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **296** 2. Name of Corporation **ACCESS DEVELOPMENT CORPORATION**
3. Street Address Principal Business Office **10 Buck Thorne Avenue** City **Riverside** State **RI** Zip **02915**
4. Business Phone No. **434-3465** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **7682**
7. Brief Description of the Character of Business Conducted in Rhode Island
Architects

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name Christina A. S. Delvecchio Street Address 10 Buck Thorne Avenue City Riverside State RI Zip 02915	Vice President Name None Street Address City _____ State _____ Zip _____
Secretary Name Christina A. S. Delvecchio Street Address 10 Buck Thorne Avenue City Riverside State RI Zip 02915	Treasurer Name Christina A. S. Delvecchio Street Address 10 Buck Thorne Avenue City Riverside State RI Zip 02915

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name Christina A. S. Delvecchio Street Address 10 Buck Thorne Avenue City Riverside State RI Zip 02915	Director Name None Street Address City _____ State _____ Zip _____
Director Name None Street Address City _____ State _____ Zip _____	Director Name None Street Address City _____ State _____ Zip _____

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES	Number of Shares	Class/Series	Par Value
	100	NO PAR VALUE	

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES	Number of Shares	Class/Series	Par Value
	50	Common	No Par Value

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



File Date: 2.22.02
Check No.: 2941
By: [Signature]

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.
Christina AS Delvecchio 2/10/02
Signature of Officer Date
Christina A. S. Delvecchio, President
Print or Type Name of Officer



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001
Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **296** 2. Name of Corporation **ACCESS DEVELOPMENT CORPORATION**

3. Street Address Principal Business Office **10 Buck Thorne Avenue** City **Riverside** State **RI** Zip **02915**

4. Business Phone No. **434-3465** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **7682**

7. Brief Description of the Character of Business Conducted in Rhode Island
Architects

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name **Christina A. S. Delvecchio**
Street Address **10 Buck Thorne Avenue**
City **Riverside** State **RI** Zip **02915**

Vice President Name **None**
Street Address
City State Zip

Secretary Name **Christina A. S. Delvecchio**
Street Address **10 Buck Thorne Avenue**
City **Riverside** State **RI** Zip **02915**

Treasurer Name **Christina A. S. Delvecchio**
Street Address **10 Buck Thorne Avenue**
City **Riverside** State **RI** Zip **02915**

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name **Christina A. S. Delvecchio**
Street Address **10 Buck Thorne Avenue**
City **Riverside** State **RI** Zip **02915**

Director Name **None**
Street Address
City State Zip

Director Name **None**
Street Address
City State Zip

Director Name **None**
Street Address
City State Zip

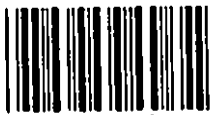
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES
Number of Shares Class/Series Par Value
100 NO PAR VALUE

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES
Number of Shares Class/Series Par Value
50 Common No Par Value

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 2 9 6 *

File Date: 2/28

Check No.: 2884

By: [Signature]

FOR SECRETARY OF STATE USE ONLY

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.

Christina A S Delvecchio 2/22/01
Signature of Officer Date

Christina A. S. Delvecchio, President
Print or Type Name of Officer

President
Title of Officer



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **296** 2. Name of Corporation **ACCESS DEVELOPMENT CORPORATION**
3. Street Address Principal Business Office **10 Buck Thorne Avenue** City **Riverside** State **RI** Zip **02915**
4. Business Phone No. **434-3465** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **7682**
7. Brief Description of the Character of Business Conducted in Rhode Island

Architects

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name Christina A. S. Delvecchio	Vice President Name None
Street Address 10 Buck Thorne Avenue	Street Address None
City State Zip Riverside RI 02915	City State Zip None
Secretary Name Christina A. S. Delvecchio	Treasurer Name Christina A. S. Delvecchio
Street Address 10 Buck Thorne Avenue	Street Address 10 Buck Thorne Avenue
City State Zip Riverside RI 02915	City State Zip Riverside RI 02915

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name Christina A. S. Delvecchio	Director Name None
Street Address 10 Buck Thorne Avenue	Street Address None
City State Zip Riverside RI 02915	City State Zip None
Director Name None	Director Name None
Street Address None	Street Address None
City State Zip None	City State Zip None

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES	Class/Series	Par Value
100 NO PAR VALUE		

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES	Class/Series	Par Value
50	Common	No Par Value

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 2 9 6 *

File Date: 2-2-00
Check No.: 2818
By: AMF

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.

Christina A S DelVecchio 1/28/00
Signature of Officer Date

Christina A. S. Delvecchio
Print or Type Name of Officer President

Title of Officer

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1999
Filing Period: January 1-March 1 • Filing Fee: \$50.00



(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 296		2. Name of Corporation ACCESS DEVELOPMENT CORPORATION	
3. Street Address Principal Business Office 10 Buck Thorne Avenue		City Riverside	State RI
		Zip 02915	
4. Business Phone No. (401) 434-3465		5. State of Incorporation RHODE ISLAND	
		6. SIC Code 7682	
7. Brief Description of the Character of Business Conducted in Rhode Island Architects			

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name CHRISTINA A.S. DELVECCHIO		Vice President Name CHRISTINA A.S. DELVECCHIO	
Street Address 10 Buck Thorne Avenue		Street Address 10 Buck Thorne Avenue	
City Riverside	State RI	City Riverside	State RI
Zip 02915		Zip 02915	
Secretary Name CHRISTINA A.S. DELVECCHIO		Treasurer Name CHRISTINA A.S. DELVECCHIO	
Street Address 10 Buck Thorne Avenue		Street Address 10 Buck Thorne Avenue	
City Riverside	State RI	City Riverside	State RI
Zip 02915		Zip 02915	

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
Director Name CHRISTINA A.S. DELVECCHIO		Director Name NONE	
Street Address 10 Buck Thorne Avenue		Street Address 10 Buck Thorne Avenue	
City Riverside	State RI	City Riverside	State RI
Zip 02915		Zip 02915	
Director Name NONE		Director Name NONE	
Street Address		Street Address	
City	State	City	State
Zip		Zip	

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT) <input type="checkbox"/>			11. SHARES ISSUED (*X* BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
100 NO PAR VALUE			50	Common	No Par Value

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 2 9 6 *

File Date: **Feb 5, 1999**

Check No.: **2737**

By: **[Signature]**

FOR SECRETARY OF STATE USE ONLY



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.

Christina A.S. Del Vecchio **2/1/99**
Signature of Officer Date

CHRISTINA A.S. DELVECCHIO

Print or Type Name of Officer

PRESIDENT

Title of Officer



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1998

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 0000296
2. Name of Corporation ACCESS DEVELOPMENT CORPORATION
3. Street Address Principal Business Office 10 Buck Thorne Avenue
City Riverside State RI Zip 02915
4. Business Phone No. (401) 434-3465
5. State of Incorporation Rhode Island
6. SIC Code 7682
7. Brief Description of the Character of Business Conducted in Rhode Island

Architects

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT)

President Name JOSEPH DelVECCHIO
Street Address 10 Buck Thorne Avenue
City Riverside State RI Zip 02915
Vice President Name None
Street Address
City State Zip
Secretary Name JOSEPH DelVECCHIO
Street Address 10 Buck Thorne Avenue
City Riverside State RI Zip 02915
Treasurer Name JOSEPH DelVECCHIO
Street Address 10 Buck Thorne Avenue
City Riverside State RI Zip 02915

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT)

Director Name JOSEPH DelVECCHIO
Street Address 10 Tuck Thorne Avenue
City Riverside State RI Zip 02915
Director Name NONE
Street Address
City State Zip
Director Name None
Street Address
City State Zip

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES	Class/Series	Par Value
100	Common	No Par Value

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES	Class/Series	Par Value
50	Common	No Par Value

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, 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.

File Date: 1-15-98

Check No.: 2651

By: JD

Joseph DelVecchio 1/12/98
Signature of Officer Date

Joseph DelVecchio
Print or Type Name of Officer

President

Title of Officer



PROFIT CORPORATION ANNUAL REPORT 1997

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 0000296
 2. Name of Corporation ACCESS DEVELOPMENT CORPORATION
 3. Street Address Principal Business Office 10 BUCK THORNE AVENUE
 City RIVERSIDE State RI Zip 02915
 4. Business Phone No. (401) 434-3465
 5. State of Incorporation RHODE ISLAND
 6. SIC Code 7682

7. Brief Description of the Character of Business Conducted in Rhode Island
 ARCHITECTS

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT)

President Name JOSEPH DeIVECCHIO Street Address 10 BUCK THORNE AVENUE City RIVERSIDE State RI Zip 02915	Vice President Name NONE Street Address City State Zip
Secretary Name JOSEPH DeIVECCHIO Street Address 10 BUCK THORNE AVENUE City RIVERSIDE State RI Zip 02915	Treasurer Name JOSEPH DeIVECCHIO Street Address 10 BUCK THORNE AVENUE City RIVERSIDE State RI Zip 02915

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT)

Director Name JOSEPH DeIVECCHIO Street Address 10 BUCK THORNE AVENUE City RIVERSIDE State RI Zip 02915	Director Name NONE Street Address City State Zip
Director Name NONE Street Address City State Zip	Director Name NONE Street Address City State Zip

10. SHARES AUTHORIZED AND ISSUED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
100	COMMON	NO PAR VALUE	50	COMMON	NO PAR VALUE

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, 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.

File Date: 2-10-97
 Check No.: 8851
 By: LUP / JEC
 FOR SECRETARY OF STATE USE ONLY

Signature of Officer: Joseph A DeVecchio
 Date: FEB 3, 1997
 Print or Type Name of Officer: JOSEPH DeIVECCHIO
 Title of Officer: PRESIDENT

**PROFIT CORPORATION
ANNUAL REPORT**

1996



State of Rhode Island and Providence Plantations
James R. Langevin, Secretary of State
Corporations Division
100 North Main Street
Providence, Rhode Island 02903-1335 • (401) 277-3040

Filing Period: January 1-March 1
Filing Fee: \$50.00

PLEASE TYPE OR PRINT IN BLACK INK.

1. CORPORATE ID NO. 0000296
2. NAME OF CORPORATION ACCESS DEVELOPMENT CORPORATION
3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE 10 BUCK THORNE AVENUE RIVERSIDE R.I. 02915
4. BUSINESS PHONE NO. (401) 434-3465
5. STATE OF INCORPORATION RHODE ISLAND
6. SIC CODE 7600
7. BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE ISLAND ARCHITECTS

8. NAMES AND ADDRESSES OF THE OFFICERS

PRESIDENT NAME JOSEPH DeLVECCHIO
VICE PRESIDENT NAME NONE
STREET ADDRESS 10 BUCK THORNE AVENUE
STREET ADDRESS NONE
CITY RIVERSIDE STATE R.I. ZIP CODE 02915
CITY NONE STATE NONE ZIP CODE NONE
SECRETARY NAME JOSEPH DeLVECCHIO
TREASURER NAME JOSEPH DeLVECCHIO
STREET ADDRESS 10 BUCK THORNE AVENUE
STREET ADDRESS 10 BUCK THORNE AVENUE
CITY RIVERSIDE STATE R.I. ZIP CODE 02915
CITY RIVERSIDE STATE R.I. ZIP CODE 02915

9. NAMES AND ADDRESSES OF THE DIRECTORS

DIRECTOR NAME JOSEPH DeLVECCHIO
DIRECTOR NAME NONE
STREET ADDRESS 10 BUCK THORNE AVENUE
STREET ADDRESS NONE
CITY RIVERSIDE STATE R.I. ZIP CODE 02915
CITY NONE STATE NONE ZIP CODE NONE
DIRECTOR NAME NONE
DIRECTOR NAME NONE
STREET ADDRESS NONE
STREET ADDRESS NONE
CITY NONE STATE NONE ZIP CODE NONE
CITY NONE STATE NONE ZIP CODE NONE

10. SHARES AUTHORIZED AND ISSUED

AUTHORIZED SHARES			ISSUED SHARES		
NUMBER OF SHARES	CLASS / SERIES	PAR VALUE	NUMBER OF SHARES	CLASS / SERIES	PAR VALUE
100	SHS COMM NO PAR VAL		100	50	NO PAR VALUE

This report must be **SIGNED IN INK** by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, 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.

Joseph A DeLVecchio
Signature of Officer
JOSEPH DeLVECCHIO
Print or Type Name of Officer
PRESIDENT
Title of Officer
1-30-96
Date

File Date: 1/30/96
Check No: 2440
By: CP
For Secretary of State Use Only

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
 Office of The Secretary of State
 100 North Main Street
 Providence, Rhode Island 02903-1335
 (401) 277-3040

ANNUAL REPORT

Please Type or Print
 File Annually - Jan 1 - March 1
 Filing Fee \$50.00
 Make Checks Payable to: Secretary of State

ALL ENTRIES MUST BE COMPLETED IN FULL OR THE FORM WILL BE RETURNED.

Corporate ID: 0000296 Annual Report for the year: 1995
 Name of Corporation: ACCESS DEVELOPMENT CORPORATION

Business entity organized under the laws of the State of: RHODE ISLAND
 For foreign entity, address and telephone number of principal office:

Business Entity is (check one):
 Business Corporation (See RIGL Chapter 7-1.1)
 Professional Service Corp. (See RIGL Chapter 7-5.1)

Phone: _____
 Address and telephone of the principal office of business
 entity in Rhode Island (Provide street address - Not P.O. Box):

Brief statement of the character of business conducted in Rhode Island:

ARCHITECTS

10 BUCK THORNE AVENUE
 RIVERSIDE, RI 02915
 (401) 434-3465

Phone: _____

THE NAMES OF THE OFFICERS ARE:

PRESIDENT	STREET ADDRESS	CITY/STATE	ZIP CODE
JOSEPH DeIVECCHIO	10 BUCK THORNE AVENUE, RIVERSIDE, RI	02915	

VICE PRESIDENT	STREET ADDRESS	CITY/STATE	ZIP CODE

SECRETARY	STREET ADDRESS	CITY/STATE	ZIP CODE
JOSEPH DeIVECCHIO	10 BUCK THORNE AVENUE, RIVERSIDE, RI	02915	

TREASURER	STREET ADDRESS	CITY/STATE	ZIP CODE
JOSEPH DeIVECCHIO	10 BUCK THORNE AVENUE, RIVERSIDE, RI	02915	

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
JOSEPH DeIVECCHIO	10 BUCK THORNE AVENUE, RIVERSIDE, RI	02915	

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE

NUMBER OF SHARES AUTHORIZED	NUMBER OF SHARES ISSUED AND OUTSTANDING
Number of Shares Class/Series	Number of Shares Class/Series
100 COMMON	50 COMMON

Date: Feb 10, 1995

By: Joseph A. DelVecchio
 JOSEPH A. DELVECCHIO

PRINT OR TYPE NAME OF OFFICER SIGNING
 PRESIDENT
 TITLE OF OFFICER SIGNING

DESIGNATED REGISTERED OR RESIDENT AGENT FOR SERVICE OF PROCESS:

PLEASE NOTE: If the registered office and/or registered agent indicated below is incorrect, Form 9 must be filed.

PAID
 FEB 13 1995
 SEC. OF STATE
 MC 2325

State of Rhode Island and Providence Plantations
CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

2097

Corporate ID 0000296

Annual Report for the year 1993

FIRST: The name of the corporation is ACCESS DEVELOPMENT CORPORATION

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is consultation to professional designers

FOURTH: If foreign, corporation, address of its principal office _____

FIFTH: Business address in Rhode Island 10 Buck Thorne Avenue, Riverside, Rhode Island 02915

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
<u>Joseph DelVecchio</u>	Director	<u>10 Buck Thorne Ave., Riverside, RI 02915</u>
	Director	
	Director	
<u>Joseph DelVecchio</u>	President	<u>10 Buck Thorne Ave., Riverside, RI 02915</u>
	Vice-President	
<u>Joseph DelVecchio</u>	Secretary	<u>10 Buck Thorne Ave., Riverside, RI 02915</u>
<u>Joseph DelVecchio</u>	Treasurer	<u>10 Buck Thorne Ave., Riverside, RI 02915</u>

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value of statement that shares are without par value
100	Common		No Par

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value of statement that shares are without par value
50	Common		No Par

Dated: January 30, 1993

ACCESS DEVELOPMENT CORPORATION
(Name of Corporation)

By: Joseph DelVecchio

Title: President

Filing Fee \$50.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

48957

Corporate ID.....296..... Annual Report for the year 1992.....

FIRST: The name of the corporation is.....ACCESS DEVELOPMENT CORPORATION.....

SECOND: It is incorporated under the laws of.....Rhode Island.....

THIRD: Character of business, briefly stated, is.....Consultation to professional designers.....

FOURTH: If foreign corporation, address of its principal office.....

FIFTH: Business address in Rhode Island.....10 Buck Thorne Ave., Riverside, RI 02915.....

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
Joseph DelVecchio	Director	10 Buck Thorne Ave., Riverside, RI
	Director	
	Director	
Joseph DelVecchio	President	10 Buck Thorne Ave., Riverside, RI
	Vice President	
Joseph DelVecchio	Secretary	10 Buck Thorne Ave., Riverside, RI
Joseph DelVecchio	Treasurer	10 Buck Thorne Ave., Riverside, RI

SEVENTH: Number of Shares authorized:

No. of Shares	Class
100	Common

Par Value
or statement that
shares are without
par value

No Par

EIGHTH: Number of Shares issued:

No. of Shares	Class
50	Common

Par Value
or statement that
shares are without
par value

No Par

PAID
FEB 11 1992
SECY OF STATE

Dated Mar 31 19 92

ACCESS DEVELOPMENT CORPORATION

(Name of Corporation)

By Joseph A. DelVecchio
President

Title

(Report must be signed by an officer)

Filing Fee \$50.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 296 *hc* Annual Report for the year 1991

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No. of Shares	Class	Series	Par Value or statement that shares are without par value
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PAID
JAN 29 1991
SECY OF STATE

Dated JAN 29 91 19

ACCESS DEVELOPMENT CORPORATION
(Name of Corporation)
By Joseph A. Del Vecchio President
Title President

(Report must be signed by an officer)

Filing Fee \$15.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE, RHODE ISLAND 02903

AJ

Corporate ID 296 Annual Report for the year 1990

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Consultation to professional designers

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No. of Shares	Class	Series	Par Value or statement that shares are without par value
50	Common		No Par

PAID
MAR 06 1990
SEC'Y. OF STATE

Dated March 1 19 90

ACCESS DEVELOPMENT CORPORATION
(Name of Corporation)
By Joseph A. DelVecchio
President
Title _____

(Report must be signed by an officer)

Filing Fee \$15.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 296 Annual Report for the year 1989

FIRST: The name of the corporation is ACCESS DEVELOPMENT CORPORATION

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Consultation to professional designers

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Joseph DelVecchio	Treasurer	10 Buck Thorne Ave., Riverside, RI

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series
100	Common	

Par Value
or statement that
shares are without
par value
No Par

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series
50	Common	

Par Value
or statement that
shares are without
par value
No Par

Dated Jan 29 19 89

ACCESS DEVELOPMENT CORPORATION

(Name of Corporation)

By Joseph A. Del Vecchio

President

Title

(Report must be signed by an officer)

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE, RHODE ISLAND 02903

Corporate ID.....296.....

Annual Report for the year.....1988

FIRST: The name of the corporation is.....ACCESS DEVELOPMENT CORPORATION.....

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.....Consultation to professional designers.....

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Joseph DelVecchio	Treasurer	10 Buck Thorne Ave., Riverside, RI

SEVENTH: Number of Shares authorized:

No. of Shares	Class
100	Common

ENTERED AUG 22 1988
Series

Par Value or statement that shares are without par value

No Par

EIGHTH: Number of Shares issued:

No. of Shares	Class
50	Common

PAID

Series
AUG 22 1988

Par Value or statement that shares are without par value

No Par

SECY. OF STATE

Dated March 1 19 88.

.....ACCESS DEVELOPMENT CORPORATION.....
(Name of Corporation)

By Joseph J. DelVecchio

Title.....President.....

(Report must be signed by an officer)

Filing Fee \$15.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 296 Annual Report for the year 1987

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Consultation to professional designers

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PAID

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50	Common		No Par

MAR 11 1987

SEC'Y OF STATE



Dated March 6 19 87

ACCESS DEVELOPMENT CORPORATION
(Name of Corporation)

By Joseph J. DelVecchio
Title President

(Report must be signed by an officer)

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 296 Annual Report for the year 1986

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Dated March 15 19 86

JUN 23 ENT'D

(Report must be signed by an officer)

APR 15 1986

ACCESS DEVELOPMENT CORPORATION
(Name of Corporation)

By Joseph A. DelVecchio
Title President

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 296

Annual Report for the year 1985

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Dated March 8 19 85

RECEIVED MAR 1985

(Report must be signed by an officer)

ACCESS DEVELOPMENT CORPORATION

(Name of Corporation)

By Joseph DelVecchio

Title President