



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2009

Filing Period: January 1 - March 1 • **Filing Fee:** \$50.00* • **THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.**

* In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 485856		2. Name of Corporation Yankee Technologies, Inc.			
3. Street Address Principal Business Office 280 Moody Street			City LUDLOW	State MA	Zip 01056
4. Business Phone No. 413 547 6595		5. State of Incorporation MASSACHUSETTS			
6. Brief Description of the Character of Business Conducted in Rhode Island Automated temperature controls/building automation					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Charles K. Abro			Vice President Name Stephen E. Racicot		
Street Address 26 West Colonial Road			Street Address 4 Westview Drive		
City Wilbraham	State MA	Zip 01095	City Oxford	State MA	Zip 01540
Secretary Name Christine E. Abro			Treasurer Name Charles K. Abro		
Street Address 26 West Colonial Road			Street Address 26 West Colonial Road		
City Wilbraham	State MA	Zip 01095	City Wilbraham	State MA	Zip 01095
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Charles K. Abro			Director Name		
Street Address 26 West Colonial Road			Street Address		
City Wilbraham	State MA	Zip 01095	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐		
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.			ISSUED SHARES THIS SECTION MUST BE COMPLETED		
			Number of Shares 30	Class Series Common	Par Value No par

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.

File Date	2-24-09
Check No.	24048
By:	MNC
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.

Signature: Charles K. Abro
Date: _____
Print or Type Name: Charles K. Abro
Title: President