



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 02904-2611
401.222.3041

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2011

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. 74070		2. Name of Corporation Madison Cutting Tools, Inc.			
3. Street Address Principal Business Office 485 Narragansett Park Drive			City Pawtucket	State RI	Zip 02861
4. Business Phone No. 333.0400		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island Manufacture, production and sales of machine equipment and tools.					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Lars Floderus			Vice President Name Edward R. Slader		
Street Address 61 Orchard Avenue			Street Address 1 Potter Avenue		
City Barrington	State RI	Zip 02806	City Smithfield	State RI	Zip 02917
Secretary Name Edward R. Slader			Treasurer Name Edward R. Slader		
Street Address 1 Potter Avenue			Street Address 1 Potter Avenue		
City Smithfield	State RI	Zip 02917	City Smithfield	State RI	Zip 02917
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	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) <input type="checkbox"/>		
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	Class/Series	Par Value
			150	CNP	0.0

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.

FILED

File Date **MAR 28 2011**
 Check No. **By MMS**
 By: **23005**
 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.

Lars Floderus 2-25-2011
 Signature Date
 Lars Floderus
 Print or Type Name
 President
 Title