

FOR SECRETARY OF STATE USE ONLY

A. Ralph Mollis, Secretary of Star Corporations Divisio 148 W. River Stree Providence, RI 02904-261 401.222.304

2012

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2012

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

1. Corporate ID No. 36166	2. Name of Corporation ALLEN, DUQUETTE & ASSOCIATES, INC				
3. Street Address Principal Business 150 MAIN STREET	et Address Principal Business Office MAIN STREET			State RI	^{Zip} 02860
6. Business Phone No. 5. State of Incorporation RHODE ISLAND					
5. Brief Description of the Character CPA FIRM	r of Business Conducte	ed in Rhode Island			
7. NAMES AND ADDRESSE	S OF THE OFFIC	ERS: ("X" BOX FOR ATTA	CHMENT) [FILL IN S	PACES BEFORE USING	ATTACHMENTS
President Name GERALD O. DUQUETTE			Vice President Name ROBERT L. ALLEN, JR		
Street Address			Street Address		
26A KING CHARLES COURT			38 TULLSON AVENUE		
Oity NORTH ATTLEBORO	State MA	^{Zip} 02760	SEEKONK	State MA	^{Zip} 02771
Secretary Name GERALD O. DUQUETTE			Treasurer Name ROBERT L. ALLEN, JR		
Street Address 26A KING CHARLES COURT			Street Address 38 TULLSON AVENUE		
NORTH ATTLEBORO	State MA	^{Zip} 02760	City SEEKONK	State MA	^{Zip} 02771
3. NAMES AND ADDRESSE	S.OF THE DIREC	TORS C"X" BOX FOR AT	FACHMENT) FILL IN	SPACES BEFORE USING	G ATTACHMENTS
Director Name GERALD O. DUQUETTE			Director Name ROBERT L. ALLEN, JR		
Street Address			Street Address		
26A KING CHARLES COURT			: 38 TULLSON AVENUE		
City NORTH ATTLEBORO	State MA	^{Zip} 02760	SEEKONK	State MA	^{Ζφ} 02771
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
). SHARES AUTHORIZED	ı	1	10. SHARES ISSUED	("X" BOX FOR ATTACE	 HMENT) []
/ oo •			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
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.			Number of Shares	Class/Series	Par Value
			200	COMMON	NO PAR
This report must be executed	d on behalf of the	corporation by an authorize	d representative. If the co	I orporation is in the hands	s of a receiver or trustee
this report must be executed				.	
	LEU		Linder penalty of pe	erjury, I declare and affirm t	hat I have examined this re
		 -		mpanying schedules and sta	
File Date	26 2012			Ouguette	1/21/12
	_		Signature	0	Date
Check No.			GERALD O. DUQUETTE		
, ,	• •	1	Print or Type Name		

PRESIDENT

Title