



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 2012**

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. 75587		2. Name of Corporation ATLANTIC ELEVATOR SOUTH, Co., Inc.			
3. Street Address Principal Business Office 1900 Fall River Avenue			City Seekonk	State MA	Zip 02771
4. Business Phone No. (508) 336-2560		5. State of Incorporation MA			
6. Brief Description of the Character of Business Conducted in Rhode Island Construct, repair, maintain, operate, and service electrical and mechanical equipment of all types, including elevators					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Jacqueline A. Driscoll			Vice President Name Thomas P. Driscoll		
Street Address 220 Valley Road			Street Address 220 Valley Road		
City Plymouth,	State MA	Zip 02360	City Plymouth	State MA	Zip 02360
Secretary Name Thomas P. Driscoll			Treasurer Name Jacqueline A. Driscoll		
Street Address as above			Street Address as above		
City	State	Zip	City	State	Zip
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Jacqueline A. Driscoll			Director Name Thomas P. Driscoll		
Street Address as above			Street Address as above		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
AUTHORIZED SHARES			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
ISSUED SHARES — THIS SECTION MUST BE COMPLETED					
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
			200,000	common	no par
			200,000	common	\$1 per share

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**

FEB 13 2012

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.

Jacqueline A. Driscoll 1/17/12  
Signature Date

JACQUELINE A. DRISCOLL

Print or Type Name

President

Title

File Date \_\_\_\_\_  
Check No. \_\_\_\_\_  
By: \_\_\_\_\_  
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