

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. 85174		2. Name of Corporation HW MOORE ASSOCIATES INC			
3. Street Address Principal Business Office 112 SHAMUT AVENUE			City BOSTON	State MA	Zip 02118
4. Business Phone No. 617-357-8145		5. State of Incorporation MASSACHUSETTS			
6. Brief Description of the Character of Business Conducted in Rhode Island					
7. NAMES AND ADDRESSES OF THE OFFICERS: (X) BOX FOR ATTACHMENT <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name HAROLD W MOORE			Vice President Name		
Street Address 555 CHAPMAN STREET			Street Address		
City CANTON	State MA	Zip 02021	City	State	Zip
Secretary Name JAMES B MARCUS			Treasurer Name HAROLD W MOORE		
Street Address 449 COMMONWEALTH AVENUE			Street Address 555 CHAPMAN STREET		
City NEWTON	State MA	Zip 02459	City CANTON	State MA	Zip 02021
8. NAMES AND ADDRESSES OF THE DIRECTORS: (X) BOX FOR ATTACHMENT <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name HAROLD W MOORE			Director Name HAROLD W MOORE JR		
Street Address 555 CHAPMAN STREET			Street Address 551 CHAPMAN STREET		
City CANTON	State MA	Zip 02021	City CANTON	State MA	Zip 02021
Director Name SHARON MAXWELL			Director Name		
Street Address 17 MOHAWK ROAD			Street Address		
City CANTON	State MA	Zip 02021	City	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED (X) BOX FOR ATTACHMENT <input checked="" 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 1000	Class/Series COMMON	Par Value NO PAR VALUE
7500 NO PAR VALUE					

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 01 2012  
 Check No. By *AMC*  
 By: 000128  
 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.

*Harold W Moore* 2/27/12  
 Signature Date  
Harold W Moore  
 Print or Type Name  
President  
 Title