

**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. <b>000137480</b>		2. Name of Corporation <b>GS ROY ELECTRICAL SERVICES INC</b>			
3. Street Address Principal Business Office <b>33 SETTLERS LANDING</b>			City <b>WESTERLY</b>	State <b>RI</b>	Zip <b>02891</b>
4. Business Phone No. <b>401-640-0852</b>		5. State of Incorporation <b>RI</b>			
6. Brief Description of the Character of Business Conducted in Rhode Island <b>ELECTRICAL CONSTRUCTION</b>					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT)			FILL IN SPACES BEFORE USING ATTACHMENTS		
President Name <b>GREGORY ROY</b>			Vice President Name <b>GREGORY ROY</b>		
Street Address <b>232 WYASSUP ROAD</b>			Street Address <b>232 WYASSUP ROAD</b>		
City <b>NORTH STONINGTO</b>	State <b>CT</b>	Zip <b>06359</b>	City <b>NORTH STONINGTO</b>	State <b>CT</b>	Zip <b>06359</b>
Secretary Name			Treasurer Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT)			FILL IN SPACES BEFORE USING ATTACHMENTS		
Director Name <b>GREGORY ROY</b>			Director Name		
Street Address <b>232 WYASSUP ROAD</b>			Street Address		
City <b>NORTH STONINGTO</b>	State <b>CT</b>	Zip <b>06359</b>	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 <b>100</b>	Class/Series <b>A</b>	Par Value <b>0</b>

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.

<b>FILED</b>	
File Date	<b>MAR 02 2012</b>
Check No.	<b>352</b>
By	<b>[Signature]</b>
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]** **2-22-2012**  
Signature Date  
**GREGORY S ROY**  
Print or Type Name  
**PRESIDENT**  
Title