



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
401.222.3040

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. 426		2. Name of Corporation ADMINISTRATION SERVICES INC			
3. Street Address Principal Business Office 200 MIDWAY RD			City Cranston	State RI	Zip 02920
4. Business Phone No. 942-8690		5. State of Incorporation RI			
6. Brief Description of the Character of Business Conducted in Rhode Island THIRD PARTY ADMINISTRATION					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Valerie E Campana			Vice President Name Donald E Lavin		
Street Address 32 Rosemere Avenue			Street Address 163 CORNELL ST		
City Johnston	State RI	Zip 02919	City Cranston	State RI	Zip 02920
Secretary Name Christine Campana			Treasurer Name Valerie E Campana		
Street Address 143 Hoffman Ave # 110			Street Address 32 Rosemere Ave		
City Cranston	State RI	Zip 02920	City Johnston	State RI	Zip 02919
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"/> FILL IN SPACES BEFORE USING ATTACHMENTS		
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 100	Class/Series Common	Par	

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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 1130

File Date _____
 Check No. _____ BY _____
 By: _____
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JUN 25 2012
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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.

Valerie E Campana 3-30-12
 Signature Date
Valerie E Campana
 Print or Type Name
Treas
 Title