

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street Providence, RI 02904-2615 401.222.3040

* 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. 000148636	2. Name of Corporation Durland & Van Vo	porhis Architects, Inc).	**************************************	
3. Street Address Principal Business Office 628 Pleasant Street, Suite 322			New Bedford	State MA	^{Zip} 02740
4 Rusiness Phone No 508-993-6567 5. State of Incorporation Massachusetts					
Architectural Firm	of Rucinoes Conducted in D	hada telaud			
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTAC President Name Charles Van Voorhis			CHMENT) FILL IN S	SPACES BEFORE USING	ATTACHMENTS
Street Address 628 Pleasant Street, Suite 322			Street Address		
New Bedford	State MA	ZiD 02740	City	State	Zib
Secretary Name Rachel Bevan Burnham			Treasurer Name Charles Van Voorhis		
628 Pleasant Street, Suite 322			Street Address 628 Pleasant Street, Suite 322		
New Bedford	State MA	ZtD 02740	City New Bedford	State MA	7iD 02740
8. NAMES AND ADDRESSES Director Name Rachel Bevan Burnham	OF THE DIRECTORS	s: ("X" BOX FOR ATT	ACHMENT) TILL IN SPACES BEFORE USING ATTACHMENTS Director Name Charles Van Voorhis		
Street Address 628 Pleasant Street, Suite 322			Street Address 628 Pleasant Street, Suite 322		
City New Bedford	State MA	<i>Ztp</i> 02740	City New Bedford	State MA	<i>zip</i> 0274 0
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zψ
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			Number of Shares	Class/Series	Par Value
instruction sheet.			200	Common	No Par
This report must be executed this report must be executed of				orporation is in the hand	ls of a receiver or trustee,

MAR 2 2 2013
File Date
Check No. By MMC
By: Of # 4701
FOR SECRETARY OF STATE USE ONLY

FII FD

Under penalty of perjury, I declare and	affirm that I have examined this report
including any accompanying schedules confirmed pereinfare true and correct.	
Signature	Date
Charles Van Voorhis	
Print or Type Name	
President	
Title	