



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State - Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2013

Filing Period: January 1 - March 1 - This report must be typed or printed legibly.

Filing Fee: \$50.00 - FAILURE TO FILE THIS REPORT BY MARCH 31 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. 69924		2. Exact name of the Corporation New England School Services, Inc.			
3. Principal office address 98 Hicks Avenue			City Medford	State MA	Zip 02155
4. Business Phone No. 617-776-4700		5. State of Incorporation Massachusetts			
6. Brief description of the character of business conducted in Rhode Island Furnish and installation of doors, frames, door hardware and bathroom partitions					
7. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name Wayne R. Hingston			Vice-President Name N/A		
Street Address 288 Border Road			Street Address		
City Concord	State MA	Zip 01742	City	State	Zip
Secretary Name Wayne R. Hingston			Treasurer Name N/A		
Street Address 288 Border Road			Street Address		
City Concord	State MA	Zip 01742	City	State	Zip
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name N/A			Director Name N/A		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name N/A			Director Name N/A		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input 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. 100 COMM NO PAR VALUE			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
			100	COMM	No Par

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.

File Date _____

Check No. _____

By: _____

FOR SECRETARY OF STATE USE ONLY

FILED

AUG 02 2013

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.

Wayne R. Hingston 7/30/2013
 Signature of Authorized Representative Date
 Wayne R. Hingston, President
 Print or Type Name of Authorized Representative

By *mme*
 Ch # 16538