



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 2014**

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. <b>24138</b>		2. Exact name of the Corporation <b>DREW PALLET CO., INC.</b>			
3. Principal office address <b>P.O. Box 7267/40 Pevear Avenue</b>		City <b>Warwick</b>	State <b>RI</b>	Zip <b>02887-0000</b>	
4. Business Phone No. <b>(401) 738-9630</b>		5. State of Incorporation <b>RI</b>			
6. Brief description of the character of business conducted in Rhode Island <b>manufacturing of pallets</b>					
<b>7. LIST ALL OFFICERS (NAMES AND ADDRESSES) (X BOX FOR ATTACHMENT) <input type="checkbox"/></b>					
President Name <b>Gregg A. Drew</b>			Vice-President Name <b>David R. Duquette</b>		
Street Address <b>86 Pamela Court</b>			Street Address <b>86 Pamela Court</b>		
City <b>Saunderstown</b>	State <b>RI</b>	Zip <b>02874-</b>	City <b>Saunderstown</b>	State <b>RI</b>	Zip <b>02874-</b>
Secretary Name <b>Gregg A. Drew</b>			Treasurer Name <b>Gregg A. Drew</b>		
Street Address <b>86 Pamela Court</b>			Street Address <b>86 Pamela Court</b>		
City <b>Saunderstown</b>	State <b>RI</b>	Zip <b>02874-</b>	City <b>Saunderstown</b>	State <b>RI</b>	Zip <b>02874-</b>
<b>8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) (X BOX FOR ATTACHMENT) <input type="checkbox"/></b>					
Director Name <b>Gregg A. Drew</b>			Director Name <b>none</b>		
Street Address <b>86 Pamela Court</b>			Street Address <b>none</b>		
City <b>Saunderstown</b>	State <b>RI</b>	Zip <b>02874-</b>	City <b>none</b>	State <b>none</b>	Zip <b>none</b>
Director Name <b>none</b>			Director Name <b>none</b>		
Street Address <b>none</b>			Street Address <b>none</b>		
City <b>none</b>	State <b>none</b>	Zip <b>none</b>	City <b>none</b>	State <b>none</b>	Zip <b>none</b>
<b>9. SHARES AUTHORIZED</b>					
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.					
<b>10. SHARES ISSUED (X BOX FOR ATTACHMENT) <input type="checkbox"/></b>					
NUMBER OF SHARES		CLASS/SERIES		PAR VALUE	
<b>100</b>		<b>Common</b>		<b>No Par</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.



**FILED**  
DEC 27 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.

Signature of Authorized Representative  
**Gregg A. Drew**  
Date  
**1/06/2014**  
Print or Type Name of Authorized Representative  
**President**