



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 02904-2615
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2014

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 116023		2. Name of Corporation Century Electric Inc			
3. Street Address Principal Business Office 11 Ledward Ave			City Westerly	State RI	Zip 02891
4. Business Phone No. 401-596-5564		5. State of Incorporation RI			
6. Brief Description of the Character of Business Conducted in Rhode Island Electrical Contractor					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Leonard Capizzano II			Vice President Name Leonard Capizzano		
Street Address 117 Tower St			Street Address 6 Timothy Dr		
City Westerly	State RI	Zip 02891	City Westerly	State RI	Zip 02891
Secretary Name Judith A Capizzano			Treasurer Name Karen Robar		
Street Address 6 Timothy Dr			Street Address 15 Fusaro Ave		
City Westerly	State RI	Zip 02891	City Westerly	State RI	Zip 02891
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Leonard Capizzano			Director Name Karen Robar		
Street Address 117 Tower St			Street Address 15 Fusaro Ave		
City Westerly	State RI	Zip 02891	City Westerly	State RI	Zip 02891
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED 1000 N Par Value			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.			ISSUED SHARES — THIS SECTION <u>MUST</u> BE COMPLETED		
			Number of Shares 200	Class/Series Common	Par Value No Par Value

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

JAN 28 2014

BY

7298

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

Karen Robar

Print or Type Name

Treasurer

Title