RI SOS Filing Number: 201435351060 Date: 02/10/2014 4:00 PM

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.	2. Exact name of the Corporation		
75233	MICHAEL A. MANSELLA, CPA INC.		
3. Principal office address: 50 DURHAM STREET	City: PROVIDENCE	State: RI	Zip: 02908
4. Business Phone No.: (401) 861-7891	5. State of Incorporation: RHODE ISLAND		
6. Brief description of the character of business conducted in Rhode Island: TO ENGAGE IN THE PROFESSIONAL EMPLOYMENT FOR PROFIT OF ACCOUNTING.			

President Name: MICHAEL A. MANSELLA	Vice-President Name: MICHAEL A. MANSELLA
Street Address: 50 DURHAM STREET	Street Address: 50 DURHAM STREET
City: PROVIDENCE State: RI Zip: 02908	City: PROVIDENCE State: RI Zip: 02908
Secretary Name: MICHAELA. MANSELLA	Treasurer Name: MICHAEL A. MANSELLA
Street Address: 50 DURHAM STREET	Street Address: 50 DURHAM STREET
City: PROVIDENCE State: RI Zip: 02908	City: PROVIDENCE State: RI Zip: 02908

8. LIST ALL DIRECTORS' NAMES AND ADDRESSES (OR ☐ IF ATTACHMENT)

Director Name: NONE	Director Name: NONE
Street Address	Street Address
City State Zip	City State Zip
Director Name: NONE	Director Name: NONE
Street Address	Street Address
City State Zip	City State Zip

9. SHARES AUTHORIZED AT THIS TIME — **10. SHARES ISSUED (OR ☐ IF ATTACHMENT)**

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.

NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
100	COMMON	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.

FILED
FEB 10 2014
FOR SECRETARY OF STATE USE ONLY
9-216841
A.A.

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.

Michael A Mansella 2/10/14
Signature of Authorized Representative Date

MICHAEL A. MANSELLA **PRESIDENT**
Print or Type Name of Authorized Representative

SECRETARY OF STATE
CORPORATIONS DIV
2014 FEB 10 PM 2:29

Form No. 630
Revised: 01/2012
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