



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. 114587		2. Exact name of the Corporation FLYNN SURVEYS INC.			
3. Principal office address 10 FIELDVIEW ROAD		City HOPE	State RI	Zip 02831	
4. Business Phone No. 401-821-6290		5. State of Incorporation RHODE ISLAND			
6. Brief description of the character of business conducted in Rhode Island LAND SURVEYING					
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) ☐					
President Name JAMES G. FLYNN			Vice-President Name SAME		
Street Address 10 FIELD			Street Address		
City HOPE	State RI	Zip 02831	City	State	Zip
Secretary Name SAME			Treasurer Name SAME		
City	State	Zip	City	State	Zip
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) ☐					
Director Name JAMES G. FLYNN			Director Name		
Street Address			Street Address		
City SAME AS ABOVE	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
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 instruction sheet.			NUMBER OF SHARES 5000	CLASS/SERIES	PAR VALUE 0

2014 FEB 10 PM 1:15

RECEIVED
SECRETARY OF STATE
CORPORATIONS DIV

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

FEB 10 2014

BY CA 216930

this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Authorized Representative

Date

JAMES G. FLYNN

Print or Type Name of Authorized Representative