



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. 91135		2. Name of Corporation US Directory Assistance, Inc.			
3. Street Address Principal Business Office 200 MIDDLE HIGHWAY, #249			City BARRINGTON	State RI	Zip 02806
4. Business Phone No. 800-966-8732		5. State of Incorporation RHODE ISLAND			
6. Brief Description of the Character of Business Conducted in Rhode Island TO ENGAGE IN THE BUSINESS OF PROVIDING TELEPHONE DIRECTORY LISTING INFORMATION					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name DAVID R. MCGARTY			Vice President Name		
Street Address 200 MIDDLE HIGHWAY, #249			Street Address		
City BARRINGTON	State RI	Zip 02806	City	State	Zip
Secretary Name SANDRA MATRONE MACK			Treasurer Name DAVID R. MCGARTY		
Street Address 301 PROMENADE STREET			Street Address 200 MIDDLE HIGHWAY, #249		
City PROVIDENCE	State RI	Zip 02908	City BARRINGTON	State RI	Zip 02806
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name DAVID R. MCGARTY			Director Name		
Street Address 200 MIDDLE HIGHWAY, #249			Street Address		
City BARRINGTON	State RI	Zip 02806	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.			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
			Number of Shares 100	Class/Series COMMON	Par Value \$1.00

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.

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.

Sandra Matrone Mack
Signature

Date

SANDRA MATRONE MACK

Print or Type Name

SECRETARY

Title

FILED	
File Date	FEB 10 2014
Check No.	216932
BY	
FOR SECRETARY OF STATE USE ONLY	