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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
157828	Ports America Management Corp.

3. Principal office address	City	State	Zip
241 Calcutta Street - 3rd. Floor	Newark	New Jersey	07114

4. Business Phone No.	5. State of Incorporation
973-522-2211	New York

6. Brief description of the character of business conducted in Rhode Island
Management Service

7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) ☐

President Name	Street Address	City	State	Zip
Michael Hassing	55 N Arizona Place, Suite 400	Chandler	Arizona	85225

Vice-President Name	Street Address	City	State	Zip
Mark Cummings	55 N Arizona Place, Suite 400	Chandler	Arizona	85225

Secretary Name	Street Address	City	State	Zip
Ray McQuiston	55 N Arizona Place, Suite 400	Chandler	Arizona	85225

Treasurer Name	Street Address	City	State	Zip
Rob Ryan	55 N Arizona Place, Suite 400	Chandler	Arizona	85225

8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) ☐

Director Name	Street Address	City	State	Zip
Chris Beall	55 N Arizona Place, Suite 400	Chandler	Arizona	85225

Director Name	Street Address	City	State	Zip
James Kowalishin	55 N Arizona Place, Suite 400	Chandler	Arizona	85225

Director Name	Street Address	City	State	Zip
Michael Hassing	55 N Arizona Place, Suite 400	Chandler	Arizona	85225

Director Name	Street Address	City	State	Zip
Andrew Nevin	55 N Arizona Place, Suite 400	Chandler	Arizona	85225

9. SHARES AUTHORIZED

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.

10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐

NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
300	Common	$100

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
BY 026559

File Date _____
Check No _____
By: _____
FOR SECRETARY OF STATE USE ONLY

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 Bellifemini 2/7/14
Signature of Authorized Representative Date

Michael Bellifemini
Print or Type Name of Authorized Representative

Form No. 630
Revised: 01/2012

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