



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. 53760		2. Exact name of the Corporation MAINLINE PAINT MFG., CO. INC.		
3. Principal office address #768 Main Street		City Pawtucket	State RI	Zip 02860
4. Business Phone No. (401) 726-3650		5. State of Incorporation Rhode Island		
6. Brief description of the character of business conducted in Rhode Island manufacturer				
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) (EX. BOX FOR ATTACHMENT)				
President Name Richard J. Main		Vice-President Name Richard J. Main		
Street Address #768 Main Street		Street Address same		
City Pawtucket	State RI	Zip 02860	City	State RI
Secretary Name Richard J. Main		Treasurer Name Richard J. Main		
Street Address same		Street Address same		
City Pawtucket	State RI	Zip 02860	City	State RI
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) (EX. BOX FOR ATTACHMENT)				
Director Name Richard J. Main		Director Name		
Street Address same		Street Address		
City Pawtucket	State RI	Zip 02860	City	State RI
Director Name		Director Name		
Street Address		Street Address		
City	State	Zip	City	State
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.		NUMBER OF SHARES 2100	CLASS/SERIES common	PAR VALUE no par
10. SHARES ISSUED (EX. BOX FOR ATTACHMENT)				

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: _____
 Filed No: _____
 By: _____
 FOR SECRETARY OF STATE (SECOND)

Form No. 630
 Revised: 01/2012

FILED
FEB 27 2014
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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.

Richard J. Main **2-24-14**
 Signature of Authorized Representative Date
RICHARD J. MAIN / PRESIDENT
 Print or Type Name of Authorized Representative