



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. 419206		2. Exact name of the Corporation Elmer A. Reynolds Jr. Plumbing & Heating, Inc.			
3. Principal office address 31 Seascape Ave.		City Middletown	State RI	Zip 02842	
4. Business Phone No. 401-207-4237		5. State of Incorporation RI			
6. Brief description of the character of business conducted in Rhode Island Plumbing & Heating					
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) ☐					
President Name Elmer A. Reynolds Jr.		Vice-President Name Michael A. Reynolds			
Street Address 31 Seascape Ave.		Street Address 31 Seascape Ave.			
City Middletown	State RI	Zip 02842	City Middletown	State RI	Zip 02842
Secretary Name Lynn M. Reynolds		Treasurer Name Elmer A. Reynolds Jr.			
Street Address 31 Seascape Ave.		Street Address 31 Seascape Ave.			
City Middletown	State RI	Zip 02842	City Middletown	State RI	Zip 02842
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) ☐					
Director Name		Director Name			
Street Address		Street Address			
City	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	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.

File Date _____

Check No. _____

By: _____

FOR SECRETARY OF STATE USE ONLY

Received _____
Recorded _____

FILED
MAR 17 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.

Elmer A. Reynolds Jr.
Signature of Authorized Representative

3-12-14
Date

Elmer A. Reynolds Jr.

Print or Type Name of Authorized Representative