



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. <b>- 797297</b>		2. Exact name of the Corporation <b>LIBERTY AUCTIONS CORP</b>			
3. Principal office address <b>304 CAMBRIDGE ROAD, STE 300</b>		City <b>WOBURN</b>	State <b>MA</b>	Zip <b>01801</b>	
4. Business Phone No. <b>978-394-1539</b>		5. State of Incorporation <b>MASSACHUSETTS</b>			
6. Brief description of the character of business conducted in Rhode Island <b>AUCTIONS</b>					
President Name <b>CHRISTOPHER KEARNEY</b>			Vice-President Name		
Street Address <b>304 CAMBRIDGE ROAD</b>			Street Address		
City <b>WOBURN</b>	State <b>MA</b>	Zip <b>01801</b>	City	State	Zip
Secretary Name <b>CHRISTOPHER KEARNEY</b>			Treasurer Name <b>CHRISTOPHER KEARNEY</b>		
Street Address <b>304 CAMBRIDGE ROAD</b>			Street Address <b>304 CAMBRIDGE ROAD</b>		
City <b>WOBURN</b>	State <b>MA</b>	Zip <b>01801</b>	City <b>WOBURN</b>	State <b>MA</b>	Zip <b>01801</b>
Director Name <b>CHRISTOPHER KEARNEY</b>			Director Name		
Street Address <b>304 CAMBRIDGE ROAD</b>			Street Address		
City <b>WOBURN</b>	State <b>MA</b>	Zip <b>01801</b>	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
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 <b>100</b>	CLASS/SERIES <b>COMMON</b>	PAR VALUE <b>NO PAR</b>

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**

MAR 19 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.

Signature of Authorized Representative

**CHRISTOPHER KEARNEY**

Print or Type Name of Authorized Representative

Date

3/15/14