



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. 442021		2. Exact name of the Corporation Hutter Construction Corporation			
3. Principal office address 810 Turnpike Road		City New Ipswich	State NH	Zip 03071	
4. Business Phone No. (603)878-2300		5. State of Incorporation New Hampshire			
6. Brief description of the character of business conducted in Rhode Island General Contractor, Commercial Construction					
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) ☐					
President Name Lars A. Traffic			Vice-President Name Richard C. Upsall		
Street Address 810 Turnpike Road, PO Box 257			Street Address 810 Turnpike Road, PO Box 257		
City New Ipswich	State NH	Zip 03071	City New Ipswich	State NH	Zip 03071
Secretary Name Caroline Owen			Treasurer Name James J. Traffic		
Street Address 10 Corporate Drive, Suite 1103			Street Address 810 Turnpike Road		
City Bedford	State NH	Zip 03110	City New Ipswich	State NH	Zip 03071
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) ☐					
Director Name Alvan A. Traffic			Director Name Richard C. Upsall		
Street Address 810 Turnpike Road, PO Box 257			Street Address 810 Turnpike Road, PO Box 257		
City New Ipswich	State NH	Zip 03071	City New Ipswich	State NH	Zip 03071
Director Name James J. Traffic			Director Name Lars A. Traffic		
Street Address 810 Turnpike Road, PO Box 257			Street Address 810 Turnpike Road, PO Box 257		
City New Ipswich	State NH	Zip 03071	City New Ipswich	State NH	Zip 03071
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
			300	Common	no par value

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

FILED

MAR 26 2014

BY

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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

03/20/2014

Date

Richard C. Upsall, Vice President

Print or Type Name of Authorized Representative