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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
75587	**ATLANTIC ELEVATOR SOUTH, Co, Inc.**

3. Principal office address	City	State	Zip
1900 Fall River Avenue	**Seekonk**	**MA**	**02771**

4. Business Phone No.	5. State of Incorporation
508-336-2560	**MA**

6. Brief description of the character of business conducted in Rhode Island
Construct, repair, maintain, operate and service electrical and mechanical equipment of all types, including elevators

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

President Name	Street Address	City	State	Zip
Jacqueline A. Driscoll	**220 Valley Road**	**Plymouth**	**MA**	**02360**

Vice-President Name	Street Address	City	State	Zip
Thomas P. Driscoll	**220 Valley Road**	**Plymouth**	**MA**	**02360**

Secretary Name	Street Address	City	State	Zip
Thomas P. Driscoll	**as above**			

Treasurer Name	Street Address	City	State	Zip
Jacqueline A. Driscoll	**as above**			

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

Director Name	Street Address	City	State	Zip
Jacqueline A. Driscoll	**as above**			

Director Name	Street Address	City	State	Zip
Thomas P. Driscoll	**as above**			

Director Name	Street Address	City	State	Zip

Director Name	Street Address	City	State	Zip

2014 JUL -8 PM 12:04

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
200,000	common	no par
200,000	common	$1 per share

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
JUL 08 2014
By 228022
A.A.

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.

Thomas P. Driscoll 06/02/2014
Signature of Authorized Representative Date

THOMAS P. DRISCOLL
Print or Type Name of Authorized Representative
T.P.D.

Form No. 630
Revised: 01/2012

109010-4-977295