



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Molis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2015

Filing Period: January 1 - March 1 • **Filing Fee:** \$50.00 • **THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.**

In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c)(4)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 12039		2. Name of Corporation WILLIAM S. SLOCUM, INC.			
3. Street Address Principal Business Office 17 Nayatt Road		City Barrington		State RI	Zip 02806
4. Business Phone No. 401-440-3667		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island Manufacturer's rep					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name William S. Slocum			Vice President Name same		
Street Address 17 Nayatt Road			Street Address		
City Barrington	State RI	Zip 02806	City	State	Zip
Secretary Name Elisabeth D. Slocum			Treasurer Name same		
Street Address 17 Nayatt Road			Street Address		
City Barrington	State RI	Zip 02806	City	State	Zip
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name William S. Slocum			Director Name Elisabeth D. Slocum		
Street Address 17 Nayatt Road			Street Address 17 Nayatt Road		
City Barrington	State RI	Zip 02806	City Barrington	State RI	Zip 02806
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED					
10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
ISSUED SHARES — THIS SECTION MUST BE COMPLETED					
Number of Shares 10		Class/Series		Par Value none	

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.

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.

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.

Elisabeth D. Slocum 1/28/15
Signature Date

Elisabeth D. Slocum
Print or Type Name

Sec/Treas.
Title

File Date _____
Check No. _____
By: _____
FOR SECRETARY OF STATE USE ONLY

FILED

JAN 30 2015

BY