



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 2015

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. 114469		2. Exact name of the Corporation ATLAS INSULATION CO., INC.			
3. Principal office address 116 Danielson Pike		City North Scituate	State RI	Zip 02857	
4. Business Phone No. 401-647-2500		5. State of Incorporation Rhode Island			
6. Brief description of the character of business conducted in Rhode Island The provision of goods and services in the insulation, gutter and shelving industries					
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name Paul J. Catanzaro			Vice-President Name Christopher J. Catanzaro		
Street Address 116 Danielson Pike			Street Address 116 Danielson Pike		
City North Scituate	State RI	Zip 02857	City North Scituate	State RI	Zip 02857
Secretary Name Paul J. Catanzaro			Treasurer Name Christopher J. Catanzaro		
Street Address 116 Danielson Pike			Street Address 116 Danielson Pike		
City North Scituate	State RI	Zip 02857	City North Scituate	State RI	Zip 02857
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name Paul J. Catanzaro			Director Name Christopher J. Catanzaro		
Street Address 116 Danielson Pike			Street Address 116 Danielson Pike		
City North Scituate	State RI	Zip 02857	City North Scituate	State RI	Zip 02857
Director Name David J. Catanzaro			Director Name Peter J. Catanzaro and Andrew J. Catanzaro		
Street Address 116 Danielson Pike			Street Address 116 Danielson Pike		
City North Scituate	State RI	Zip 02857	City North Scituate	State RI	Zip 02857
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
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
			500	common	\$0.01

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

BY _____

FILED

FEB 17 2015

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

Date

Paul J. Catanzaro, President

Print or Type Name of Authorized Representative