



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.

51000

2. Name of Corporation

Simplex Time Recorder Co.

3. Street Address Principal Business Office

SIMPLEX PLAZA

City

GARDNER

State

MA

Zip

01441

4. Business Phone No.

978-630-7933

5. State of Incorporation

MASSACHUSETTS

6. SIC Code

3699

7. Brief Description of the Character of Business Conducted in Rhode Island

SALES/SERVICE

8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT)

FILL IN SPACES BEFORE USING ATTACHMENTS

President Name

EDWARD B. WATKINS

Street Address

SIMPLEX PLAZA

City

GARDNER

MA

Zip

01441

Secretary Name

JOSEPH R. D'AVIGNON

Street Address

SIMPLEX PLAZA

City

GARDNER

MA

Zip

01441

Vice President Name

STANLEY L. CLARK

Street Address

SIMPLEX PLAZA

City

GARDNER

State

MA

Zip

01441

Treasurer Name

JOSEPH MARZILLI

Street Address

SIMPLEX PLAZA

City

GARDNER

State

MA

Zip

01441

9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT)

FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name

EDWARD G. WATKINS

Street Address

SIMPLEX PLAZA

City

GARDNER

MA

Zip

01441

Director Name

STANLEY L. CLARK

Street Address

SIMPLEX PLAZA

City

GARDNER

MA

Zip

01441

Director Name

JOHN J. COLEMAN

Street Address

SIMPLEX PLAZA

City

GARDNER

State

MA

Zip

01441

Director Name

EDWARD F. HINES JR.

Street Address

SIMPLEX PLAZA

City

GARDNER

State

MA

Zip

01441

10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)

11. SHARES ISSUED ("X" BOX FOR ATTACHMENT)

AUTHORIZED SHARES

ISSUED SHARES

Number of Shares

Class/Series

Par Value

Number of Shares

Class/Series

Par Value

5,800,000 COMMON-NON VOTING 1.00

5,520,340 ^{NON} COMMON-VOTING 1.00

200,000 COMMON-VOTING 1.00

104,202 COMMON-VOTING 1.00

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 51000 *

File Date: 3/3/00

Check No.: 206935

By: _____

FOR SECRETARY OF STATE USE ONLY

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.

Joseph Marzilli 2/23/00
Signature of Officer Date

JOSEPH MARZILLI
Print or Type Name of Officer

V.P., CORP TREASURER
Title of Officer