



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. 187768		2. Exact name of the Corporation J.P. LaRue, Inc			
3. Principal office address 35 Oak Forest Drive		City Little Compton	State RI	Zip 02837	
4. Business Phone No. 401.592.0445		5. State of Incorporation RI			
6. Brief description of the character of business conducted in Rhode Island Playground Equipment Sales/Inspections					
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name John LaRue			Vice-President Name Keegan LaRue		
Street Address 35 Oak Forest Drive			Street Address 35 Oak Forest Drive		
City Little Compton	State RI	Zip 02837	City Little Compton	State RI	Zip 02837
Secretary Name John LaRue			Treasurer Name John LaRue		
Street Address 35 Oak Forest Drive			Street Address 35 Oak Forest Drive		
City Little Compton	State RI	Zip 02837	City Little Compton	State RI	Zip 02837
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name none			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
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"/>		
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
			275	STK	100

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: _____

FILED

FOR SECRETARY OF STATE USE ONLY DEC 09 2015

Form No. 630
Revised: 01/2012

By 262905

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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

Date

John P. LaRue

Print or Type Name of Authorized Representative