



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 2016

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. 143160		2. Exact name of the Corporation Ellis Electric, Inc.			
3. Principal office address 825 Worden's Pond Road			City South Kingstown	State RI	Zip 02879
4. Business Phone No. (401)789-1186			5. State of Incorporation Rhode Island		
6. Brief description of the character of business conducted in Rhode Island To engage in all aspects of electrical installation, repair and maintenance, both commercial and residential.					
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>					
President Name Steven Ellis			Vice-President Name Steven Ellis		
Street Address 825 Worden's Pond Road			Street Address 825 Worden's Pond Road		
City South Kingstown	State RI	Zip 02879	City South Kingstown	State RI	Zip 02879
Secretary Name Steven Ellis			Treasurer Name Steven Ellis		
Street Address 825 Worden's Pond Road			Street Address 825 Worden's Pond Road		
City South Kingstown	State RI	Zip 02879	City South Kingstown	State RI	Zip 02879
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name			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.					
None					

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 # _____

By: _____

FOR SECRETARY OF STATE USE ONLY

FILED

FEB 16 2016

BY 3510 DS

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

Steven Ellis

Print or Type Name of Authorized Representative