



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

Matthew A. Brown, Secretary of State  
Corporations Division  
100 North Main Street, Providence, RI 02903-1335  
401.222.3040

**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005**

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 101603 2. Name of Corporation Dejana Truck & Utility Equipment Company of New England, Inc.

3. Street Address Principal Business Office 360 Farnum Pike City Smithfield State RI Zip 02917

4. Business Phone No. 401 231-9797 5. State of Incorporation RI 6. SIC Code 0

7. Brief Description of the Character of Business Conducted in Rhode Island  
Truck Equipment Sales and Service

**8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT)  FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name Peter P. Dejana	Vice President Name Andrew Dejana
Street Address 490 Pulaski Road	Street Address 490 Pulaski Road
City Kings Park State NY Zip 11754	City Kings Park State NY Zip 11754
Secretary Name	Treasurer Name
Street Address	Street Address
City State Zip	City State Zip

**9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT)  FILL IN SPACES BEFORE USING ATTACHMENTS**

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

**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
200	No Par Value		200	No Par	

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



**FILED**

File Date: DEC 28 2005

Check No. By M 86560

FOR SECRETARY OF STATE USE ONLY *CSA*

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.

*Peter P. Dejana* 12/15/05  
Signature of Officer Date  
**PETER P. DEJANA**  
Print or Type Name of Officer  
**PRESIDENT**  
Title of Officer



**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004**

Filing Period: January 1 - March 1 • Filing Fee: \$50.00  
(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. <b>101603</b>	2. Name of Corporation <b>DEJANA TRUCK &amp; UTILITY EQUIPMENT CO. OF NEW ENGLAND, INC.</b>		
3. Street Address, Principal Business Office <b>360 FARNUM PIKE</b>		City <b>PROVIDENCE</b>	State <b>RI</b>
4. Business Phone No. <b>401-231-9797</b>		5. State of Incorporation <b>RHODE ISLAND</b>	6. SIC Code <b>371-3313</b>

7. Brief Description of the Character of Business Conducted in Rhode Island  
**TRUCK EQUIPMENT SALES AND SERVICE.**

8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT)  FILL IN SPACES BEFORE USING ATTACHMENTS

President Name <b>ANDREW DEJANA</b>	Vice President Name <b>Peter P. DEJANA</b>
Street Address <b>282 SWAN LAKE DRIVE</b>	Street Address <b>101 SWAN LAKE DRIVE</b>
City <b>Patchogue</b>	City <b>Patchogue</b>
State <b>N.Y.</b>	State <b>NY</b>
Zip <b>11772</b>	Zip <b>11772</b>
Secretary Name <b>Peter P. DEJANA</b>	Treasurer Name <b>ANDREW DEJANA</b>
Street Address <b>101 SWAN LAKE DRIVE</b>	Street Address <b>282 SWAN LAKE DRIVE</b>
City <b>Patchogue</b>	City <b>Patchogue</b>
State <b>NY</b>	State <b>NY</b>
Zip <b>11772</b>	Zip <b>11772</b>

9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT)  FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name	Director Name
Street Address	Street Address
City	City
State	State
Zip	Zip
Director Name	Director Name
Street Address	Street Address
City	City
State	State
Zip	Zip

10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
<b>200 NO PAR VALUE</b>			<b>200</b>		

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



\* 1 0 1 6 0 3 \*

File Date **3/22/04**  
Check No. **12300**  
By: **[Signature]**

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.

Signature of Officer **[Signature]** Date **1/6/04**  
Print or Type Name of Officer **ANDREW DEJANA**  
Title of Officer **PRESIDENT**



**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003**  
Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. **101603** 2. Name of Corporation **DEJANA TRUCK & UTILITY EQUIPMENT CO. OF NEW ENGLAND, INC.**  
3. Street Address Principal Business Office **360 FARNUM PIKE** City **SMITHFIELD** State **RI** Zip **02917**  
4. Business Phone No. **401-231-9797** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **0**

**TRUCK EQUIPMENT SALES & SERVICE/FINAL STAGE MANUFACTURER**  
8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) **FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name <b>ANDREW DEJANA</b> Street Address <b>282 SWAN LAKE DRIVE</b> City <b>PATCHOGUE</b> State <b>NY</b> Zip <b>11772</b>	Vice President Name <b>PETER P. DEJANA</b> Street Address <b>101 SWAN LAKE DRIVE</b> City <b>PATCHOGUE</b> State <b>NY</b> Zip <b>11772</b>
Secretary Name <b>PETER P. DEJANA</b> Street Address <b>101 SWAN LAKE DRIVE</b> City <b>PATCHOGUE</b> State <b>NY</b> Zip <b>11772</b>	Treasurer Name <b>ANDREW DEJANA</b> Street Address <b>282 SWAN LAKE DRIVE</b> City <b>PATCHOGUE</b> State <b>NY</b> Zip <b>11772</b>

9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) **FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name <b>ANDREW DEJANA</b> Street Address <b>282 SWAN LAKE DRIVE</b> City <b>PATCHOGUE</b> State <b>NY</b> Zip <b>11772</b>	Director Name <b>PETER P. DEJANA</b> Street Address <b>101 SWAN LAKE DRIVE</b> City <b>PATCHOGUE</b> State <b>NY</b> Zip <b>11772</b>
<b>NONE</b> Street Address City State Zip	<b>NONE</b> Street Address City State Zip

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

AUTHORIZED SHARES	Number of Shares	Class/Series	Par Value
	<b>200</b>	<b>NO PAR VALUE</b>	

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

ISSUED SHARES	Number of Shares	Class/Series	Par Value
	<b>200</b>	<b>COMMON</b>	<b>NO PAR</b>

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



\* 1 0 1 6 0 3 \*

File Date: 2/24/03  
Check No.: 015878  
By: [Signature]

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] 2/27/2003  
Signature of Officer Date  
**ANDREW DEJANA**  
Print or Type Name of Officer  
**PRESIDENT**  
Title of Officer



**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002**

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 101603		2. Name of Corporation DEJANA TRUCK & UTILITY EQUIPMENT CO. OF NEW ENGLAND, INC.			
3. Street Address Principal Business Office 360 FARNUM PIKE			City SMITHFIELD	State RI	Zip 02917
4. Business Phone No. 401-231-9797		5. State of Incorporation RHODE ISLAND			6. SIC Code
7. Brief Description of the Character of Business Conducted in Rhode Island TRUCK EQUIPMENT SALES & SERVICE/FINAL STAGE MANUFACTURER					
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name ANDREW DEJANA			Vice President Name PETER P. DEJANA		
Street Address 282 SWAN LAKE DRIVE			Street Address 101 SWAN LAKE DRIVE		
City PATCHOGUE	State NY	Zip 11772	City PATCHOGUE	State NY	Zip 11772
Secretary Name PETER P. DEJANA			Treasurer Name ANDREW DEJANA		
Street Address 101 SWAN LAKE DRIVE			Street Address 282 SWAN LAKE DRIVE		
City PATCHOGUE	State NY	Zip 11772	City PATCHOGUE	State NY	Zip 11772
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name ANDREW DEJANA			Director Name PETER P. DEJANA		
Street Address 282 SWAN LAKE DRIVE			Street Address 101 SWAN LAKE DRIVE		
City PATCHOGUE	State NY	Zip 11772	City PATCHOGUE	State NY	Zip 11772
Director Name None			Director Name None		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT) <input type="checkbox"/>					
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
200	NO PAR VALUE		200	COMMON	NO PAR
11. SHARES ISSUED (*X* BOX FOR ATTACHMENT) <input type="checkbox"/>					

RECEIVED  
STATE  
SECRETARY OF STATE  
FEB 11 2 47 PM '02

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

**FILED**

File Date: FEB 11 2002  
 Check No.: By [Signature] 294040  
 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.

[Signature] 2/11/02  
 Signature of Officer Date  
ANDREW DEJANA  
 Print or Type Name of Officer  
President  
 Title of Officer



**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001**

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 101603		2. Name of Corporation DEJANA TRUCK & UTILITY EQUIPMENT CO. OF NEW ENGLAND, INC.			
3. Street Address Principal Business Office 360 FARNUM PIKE			City SMITHFIELD	State RI	Zip 02917
4. Business Phone No. 401-231-9797		5. State of Incorporation RHODE ISLAND			6. SIC Code
7. Brief Description of the Character of Business Conducted in Rhode Island TRUCK EQUIPMENT SALES & SERVICE/FINAL STAGE MANUFACTURER					
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name ANDREW DEJANA			Vice President Name PETER P. DEJANA		
Street Address 282 SWAN LAKE DRIVE			Street Address 101 SWAN LAKE DRIVE		
City PATCHOGUE	State NY	Zip 11772	City PATCHOGUE	State NY	Zip 11772
Secretary Name PETER DEJANA			Treasurer Name ANDREW DEJANA		
Street Address 101 SWAN LAKE DRIVE			Street Address 282 SWAN LAKE DRIVE		
City PATCHOGUE	State NY	Zip 11772	City PATCHOGUE	State NY	Zip 11772
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name ANDREW DEJANA			Director Name PETER P. DEJANA		
Street Address 282 SWAN LAKE DRIVE			Street Address 101 SWAN LAKE DRIVE		
City PATCHOGUE	State NY	Zip 11772	City PATCHOGUE	State NY	Zip 11772
Director Name None			Director Name None		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT) <input type="checkbox"/>					
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
200	NO PAR VALUE		200	COMMON	NO PAR
11. SHARES ISSUED (*X* BOX FOR ATTACHMENT) <input type="checkbox"/>					

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STATE  
FEB 11 2 47 PM '02

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

**FILED**

File Date: FEB 11 2002  
 Check No.: By [Signature] 294046  
 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.

[Signature] 2/11/02  
 Signature of Officer Date  
ANDREW DEJANA  
 Print or Type Name of Officer  
President  
 Title of Officer



**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. **101603** 2. Name of Corporation **DEJANA TRUCK & UTILITY EQUIPMENT CO. OF NEWENGLAND, INC.**  
3. Street Address Principal Business Office **360 FARNUM PIKE** City **SMITHFIELD** State **RI** Zip **02917**  
4. Business Phone No. **201-231-9797** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code

7. Brief Description of the Character of Business Conducted in Rhode Island  
**TRUCK EQUIPMENT SALES & SERVICE/FINAL STAGE MANUFACTURER**

**8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name <b>ANDREW DEJANA</b> Street Address <b>282 SWAN LAKE DRIVE</b> City <b>PATCHOGUE</b> State <b>NY</b> Zip <b>11772</b>	Vice President Name <b>PETER P. DEJANA</b> Street Address <b>101 SWAN LAKE DRIVE</b> City <b>PATCHOGUE</b> State <b>NY</b> Zip <b>11772</b>
Secretary Name <b>CHRISTINE SURDI</b> Street Address <b>280 SWAN LAKE DRIVE</b> City <b>PATCHOGUE</b> State <b>NY</b> Zip <b>11772</b>	Treasurer Name <b>JOANNE SOUTHWICK</b> Street Address <b>56 N. PINELAKE DRIVE</b> City <b>PATCHOGUE</b> State <b>NY</b> Zip <b>11772</b>

**9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name <b>Joanne E. Southwick</b> Street Address <b>56 N. Pine Lake Drive</b> City <b>Patchogue</b> State <b>New York</b> Zip <b>11772</b>	Director Name <b>Andrew DeJana</b> Street Address <b>282 Swan Lake Drive</b> City <b>Patchogue</b> State <b>NY</b> Zip <b>11772</b>
Director Name <b>Christine Surdi</b> Street Address <b>280 Swan Lake Drive</b> City <b>Patchogue</b> State <b>NY</b> Zip <b>11772</b>	Director Name <b>Peter P. DeJana</b> Street Address <b>101 Swan Lake Drive</b> City <b>Patchogue</b> State <b>NY</b> Zip <b>11772</b>

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

AUTHORIZED SHARES	Class/Series	Par Value
200	NO PAR VALUE	

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

ISSUED SHARES	Class/Series	Par Value
200	common	no par

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



\* 1 0 1 6 0 3 \*

File Date: **FILED**

Check No.: **FEB 28 2000**

By: **[Signature]**

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.

**[Signature]** **2/15/00**  
Signature of Officer Date

**Christine Surdi**  
Print or Type Name of Officer

**Secretary**  
Title of Officer



**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1999**

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 0101603  
 2. Name of Corporation DEJANA TRUCK + UTILITY EQUIPMENT OF NEW ENGLAND, INC.  
 3. Street Address Principal Business Office 360 FARNUM PIKE  
 City SMITHFIELD State RI Zip 02917  
 4. Business Phone No. 401-231-9797  
 5. State of Incorporation RHODE ISLAND  
 6. SIC Code 371-3713

7. Brief Description of the Character of Business Conducted in Rhode Island  
 Truck equipment sales & service/ FINAL STAGE MANUFACTURER

**8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name			Vice President Name		
ANDREW DEJANA			PETER P. DEJANA		
Street Address			Street Address		
282 SWAN LAKE DRIVE			101 SWAN LAKE DRIVE		
City	State	Zip	City	State	Zip
PATCHOGUE	NY	11772	PATCHOGUE	NY	11772
Secretary Name			Treasurer Name		
CHRISTINE SURDI			JOANNE SOUTHWICK		
Street Address			Street Address		
280 SWAN LAKE DRIVE			56 N. PINELAKE DRIVE		
City	State	Zip	City	State	Zip
PATCHOGUE	NY	11772	PATCHOGUE	NY	11772

**9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name			Director Name		
Joanne E. Southwick			ANDREW DEJANA		
Street Address			Street Address		
56 N. Pine Lake Drive			282 SWAN LAKE DRIVE		
City	State	Zip	City	State	Zip
PATCHOGUE	New York	11772	PATCHOGUE	NY	11772
Director Name			Director Name		
CHRISTINE SURDI			PETER P. DEJANA		
Street Address			Street Address		
280 SWAN LAKE DRIVE			101 SWAN LAKE DRIVE		
City	State	Zip	City	State	Zip
PATCHOGUE	NY	11772	PATCHOGUE	NY	11772

RECEIVED  
 SECRETARY OF STATE  
 NOV 12 10 25 AM '99

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

AUTHORIZED SHARES	Class/Series	Par Value
200	common	no par

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

ISSUED SHARES	Class/Series	Par Value
200	common	no par

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

RECEIVED  
 SECRETARY OF STATE  
 NOV 12 11 17 AM '99

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.

*Joanne Southwick*  
 Signature of Officer  
 Date 11/8/99  
 JOANNE SOUTHWICK  
 Print or Type Name of Officer  
 TREASURER  
 Title of Officer

File Date: PAID 11/23/99  
 Check No.: NOV 16 1999  
 By: SECY OF STATE  
 FOR SECRETARY OF STATE USE ONLY