

## 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

Amended

## PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR \_ Filing Period: January 1 - March 1 - This report must be typed or printed legibly.

2017

1. Entity ID No.	2. Exact nam	e of the Corporation				
000387092	1	Advanced Safety Systems, Inc.				
. Principal office address 141 Summit Street			City Peabody	State MA	Zip 01960 ≧	
4. Business Phone No. 800-991-2774			5. State of Incorporation MA			
<ul> <li>Brief description of the characteristics</li> <li>Fire protection solution</li> </ul>		conducted in Rhode Island	1		12	
. LIST ALL OFFICERS (NAM	ES AND ADDRE	SSES) ("X" BOX FOR A	TACHMENT)			
President Name Patrick Lynch (President & CEO)			Vice-President Name			
Street Address 3751 Joy Springs Drive			Street Address on			
ity Mobile	State AL	Zip 36693	City	State	Zip	
Secretary Name David Watkins			Treasurer Name David Watkins (Treasurer and Clerk)			
Street Address 840 Gessner Road, Ste. 950			Street Address 840 Gessner Road, Ste. 950			
त्राप्र Houston	State TX	Zip 77024	City Houston	State TX	Zip 77024	
. List <u>all</u> directors (NA	MES AND ADD	RESSES) ("X" BOX FOR	ATTACHMENT)			
Director Name Jack Guldry (Chairmar	of the Boar	d)	Director Name			
Street Address 840 Gessner Road, Ste. 950			Street Address			
iy Houston	State TX	Zip 77024	City	State	Zip	
Director Name David Watkins			Director Name			
Breet Address 840 Gessner Road, Ste	s. 950		Street Address	, ,, <del>(*** ** *</del> .		
City Houston	State TX	Zip 77024	City	State	Ζφ	
. SHARES AUTHORIZED			10. SHARES ISSUED	("X" BOX FOR ATTAC	HMENT)	
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing.		Office of the Constant	NUMBER OF SHARES	CLASS/SERIES	PARVALUE	
		1,000	Common	No Par Value		
This report must be executed o	on behalf of the c this report must	orporation by an authorize t be executed on behalf of	d representative. If the c the corporation by the re	orporation is in the hand	s of a receiver or trustee,	
File Date			Under penalty of pe	rjury, I declare and affl	on that I have examined chedules and statement	
Check No	<u></u>	FILED	- 10	7///	> 05/10/2017	
By:			Signature of Authoria	zed Representative	Date	
FOR SECRETARY OF STATE USE ONLY MAY 1 2 2017			David Watkins			
MAY 1 2 2017			Print or Type Name of Authorized Representative			

BY Mu 12:15

Form No. 630 Revised: 01/2012

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## ATTACHMENT TO PROFIT CORPORATION ANNUAL REPORT (AMENDED 2017) FOR ADVANCED SAFETY SYSTEMS, INC. (ID# 000387092)

## 7. (Additional) Officers:

<u>NAME</u>	TITLE	ADDRESS
Claude Warren	CFO	3751 Joy Springs Drive, Mobile, AL 36693
Jeffery Kidd	General Manager	240 Ballardvale Street, Wilmington, MA 01887