



LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2005

Filing Period: September 1 - November 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. ID No. 94611		2. Exact name of the limited liability company PowerProducts Systems, LLC			
3. State of Formation DELAWARE		4. Brief description of the character of the business which is actually conducted in Rhode Island SALES, INSTALLATION AND SERVICING OF GENERATOR UNITS			
5. Principal office address 81 Bay State Road		City Wakefield	State MA	Zip 01880	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name Jeffrey P. Manning			Contact Title Managing Director		
Street Address Bay State Road		City Wakefield	State MA	Zip 01880	
7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE FILL IN SPACES BEFORE USING ATTACHMENTS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> ANY MODIFICATIONS TO MANAGERS REQUIRES FILING OF AMENDMENT, R.I.G.L. 7-16-12 (a) (2) / 7-16-52					
Manager Name Jeffrey P. Manning			Manager Name John Knopf		
Street Address 81 Bay State Road		Street Address 81 Bay State Road			
City Wakefield	State MA	Zip 01880	City Wakefield	State MA	Zip 01880
Manager Name			Manager Name		
Street Address		Street Address			
City	State	Zip	City	State	Zip
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 642 - R.I.G.L. 7-16-11					
Agent Name CT CORPORATION SYSTEM			Address		
Address 10 WEYBOSSET STREET		City PROVIDENCE		Zip 02903	

SECRETARY OF STATE
CORP. SYSTEM
05 SEP 2005 11:59

This report must be signed in ink by an authorized person pursuant to R.I.G.L. 7-16-66.



94611

File Date	FILED
Check No.	SEP 30 2005
By:	By <i>[Signature]</i> 8965
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] _____ Date 09-12-05
Signature of Authorized Person
Jeffrey P. Manning
Print or Type Name of Authorized Person



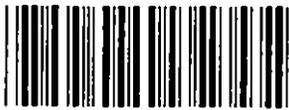
LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2004

Filing Period: September 1 - November 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

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7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE FILL IN SPACES BEFORE USING ATTACHMENTS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> ANY MODIFICATIONS TO MANAGERS REQUIRES FILING OF AMENDMENT, R.I.G.L. 7-16-12 (a) (2) / 7-16-52					
Manager Name Jeffrey P. Manning			Manager Name John Knopf		
Street Address 81 Bay State Road			Street Address 81 Bay State Road		
City Wakefield	State MA	Zip 01880	City Wakefield	State MA	Zip 01880
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 642 - R.I.G.L. 7-16-11					
Agent Name CT CORPORATION SYSTEM			Address		
Address 10 WEYBOSSET STREET			City PROVIDENCE	Zip 02903	

This report must be signed in ink by an authorized person pursuant to R.I.G.L. 7-16-66.



* 9 4 6 1 1 *

File Date 9/27/04
Check No. 38262
By: DA
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] 9/22/04
Signature of Authorized Person Date
Jeffrey P. Manning
Print or Type Name of Authorized Person



LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2003

Filing Period: September 1 - November 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

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3. State of Formation DELAWARE		4. Brief description of the character of the business which is actually conducted in Rhode Island SALES, INSTALLATION AND SERVICING OF GENERATOR UNITS			
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6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name Jeffrey P. Manning			Contact Title Managing Director		
Street Address 81 Bay State Road		City Wakefield	State MA	Zip 01880	
7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE FILL IN SPACES BEFORE USING ATTACHMENTS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> ANY MODIFICATIONS TO MANAGERS REQUIRES FILING OF AMENDMENT, R.I.G.L. 7-16-12 (a) (2) / 7-16-52					
Manager Name Jeffrey P. Manning			Manager Name John Knopf		
Street Address 81 Bay State Road			Street Address 81 Bay State Road		
City Wakefield	State MA	Zip 01880	City Wakefield	State MA	Zip 01880
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 642 - R.I.G.L. 7-16-11					
Agent Name CT CORPORATION SYSTEM			Address		
Address 10 WEYBOSSET STREET			City PROVIDENCE	Zip 02903	

This report must be signed in ink by an authorized person pursuant to R.I.G.L. 7-16-66.



* 9 4 6 1 1 *

File Date 9-22-03
Check No 34651
By: de
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.

Jeffrey P. Manning 9.19.03
Signature of Authorized Person Date
Jeffrey P. Manning
Print or Type Name of Authorized Person



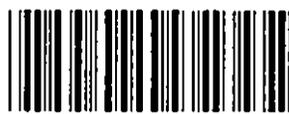
LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2002

Filing Period: September 1 - November 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. ID No. 94611		2. Exact name of the limited liability company PowerProducts Systems, LLC			
3. State of Formation DELAWARE		4. Brief description of the character of the business which is actually conducted in Rhode Island SALES, INSTALLATION AND SERVICING OF GENERATOR UNITS			
5. Principal office address 81 Bay State Road		City Wakefield	State MA	Zip 01880	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name Jeffrey P. Manning			Contact Title Managing Director		
Street Address 81 Bay State Road		City Wakefield	State MA	Zip 01880	
7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE FILL IN SPACES BEFORE USING ATTACHMENTS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> ANY MODIFICATIONS TO MANAGERS REQUIRES FILING OF AMENDMENT. R.I.G.L 7-16-12 (a) (2) / 7-16-52					
Manager Name Jeffrey P. Manning		Manager Name John Knopf			
Street Address 81 Bay State Road		Street Address 81 Bay State Road			
City Wakefield	State MA	Zip 01880	City Wakefield	State MA	Zip 01880
Manager Name		Manager Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
8. RESIDENT AGENT IN RHODE ISLAND -DO NOT ALTER- Changes require filing of Form 642 - R.I.G.L. 7-16-11					
Agent Name CT CORPORATION SYSTEM			Address		
Address 10 WEYBOSSET STREET		City PROVIDENCE	Zip 02903		

This report must be signed in ink by an authorized person pursuant to 7-16-66.



* 9 4 6 1 1 *

File Date	<u>9-9-02</u>
Check No.	<u>30678</u>
By:	<u>[Signature]</u>
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] 9/14/02
Signature of Authorized Person Date
Jeffrey P. Manning
Print or Type Name of Authorized Person

Filing Fee: \$50.00

To be filed annually between
September 1 and November 1



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Corporations Division
100 North Main Street Providence, Rhode Island 02903-1335
Telephone (401) 222-3040

LIMITED LIABILITY COMPANY

ID Number FLLC 94611

Annual Report for the year 2001

1. The name of the limited liability company is:

PowerProducts Systems, LLC

2. The address of the principal office of the limited liability company is:

81 Bay State Road, Wakefield, MA 01880

3. The state or other jurisdiction under the laws of which it is formed is DELAWARE

4. The name and address of its resident agent is: CT CORPORATION SYSTEM

10 WEYBOSSET STREET PROVIDENCE RI 02903

5. The current mailing address of the limited liability company and the name or title of a person to whom communications may be directed are: 81 Bay State Road, Wakefield, MA 01880

Jeffrey P. Manning, Managing Director

6. A brief statement of the character of the business in which the limited liability company is actually engaged in this state: Sales, installation and servicing of generator units

7. If the limited liability company has managers, the name and address of each manager of the limited liability company

Name	Address
<u>Jeffrey P. Manning</u>	<u>81 Bay State Road, Wakefield, MA 01880</u>
<u>John Knopf</u>	<u>81 Bay State Road, Wakefield, MA 01880</u>

Dated September, 2001

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.



PowerProducts Systems, LLC
Exact Name of Limited Liability Company

By [Signature] Jeffrey P. Manning
Managing Director Title

FOR SECRETARY OF STATE USE ONLY	
File Date:	<u>9-17-01</u>
Check No.:	<u>24505</u>
By:	<u>[Signature]</u>

Form No. 632
Revised 01/99

Filing Fee: \$50.00

To be filed annually between
September 1 and November 1



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Corporations Division
100 North Main Street Providence, Rhode Island 02903-1335
Telephone (401) 222-3040

LIMITED LIABILITY COMPANY

ID Number FLLC 94611

Annual Report for the year 2000

1. The name of the limited liability company is:

PowerProducts Systems, LLC

2. The address of the principal office of the limited liability company is:

81 Bay State Road, Wakefield, MA 01880

3. The state or other jurisdiction under the laws of which it is formed is DELAWARE

4. The name and address of its resident agent is: CT CORPORATION SYSTEM

10 WEYBOSSET STREET PROVIDENCE RI 02903

5. The current mailing address of the limited liability company and the name or title of a person to whom communications may be directed are: 81 Bay State Road, Wakefield, MA 01880

Jeffrey P. Manning, Managing Director

6. A brief statement of the character of the business in which the limited liability company is actually engaged in this state: Sales, installation and servicing of generator units

7. If the limited liability company has managers, the name and address of each manager of the limited liability company

Jeffrey P. Manning

81 Bay State Road, Wakefield, MA 01880

John Knopf

81 Bay State Road, Wakefield, MA 01880

Dated September 11, 2000

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.



PowerProducts Systems, LLC
Exact Name of Limited Liability Company

By [Signature] Jeffrey P. Manning
Managing Director Title

FOR SECRETARY OF STATE USE ONLY
File Date: 9-15-00
Check No.: 20412
By: AMF

Filing Fee: \$50.00

To be filed annually between
September 1 and November 1



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Corporations Division
100 North Main Street Providence, Rhode Island 02903-1335
Telephone (401) 222-3040

LIMITED LIABILITY COMPANY

ID Number FL 94611

Annual Report for the year 1999

1. The name of the limited liability company is:

PowerProducts Systems, LLC

2. The address of the principal office of the limited liability company is:

81 Bay State Road, Wakefield, MA 01880

3. The state or other jurisdiction under the laws of which it is formed is DELAWARE

4. The name and address of its resident agent is: CT CORPORATION SYSTEM

123 DYER STREET PROVIDENCE, RI 02903

5. The current mailing address of the limited liability company and the name or title of a person to whom communications may be directed are: 81 Bay State Road

Wakefield, MA 01880

6. A brief statement of the character of the business in which the limited liability company is actually engaged in this state: sales, installation and servicing of generator units

7. If the limited liability company has managers, the name and address of each manager of the limited liability company

Name

Address

Jeffrey P. Manning

81 Bay State Road, Wakefield, MA 01880

John Knopf

81 Bay State Road, Wakefield, MA 01880

Dated September 13, 1999

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.



* 9 4 6 1 1 *

PowerProducts Systems, LLC

Exact Name of Limited Liability Company

By [Signature] Jeffrey P. Manning

Managing Director

Title

FOR SECRETARY OF STATE USE ONLY
File Date: 9-17-99
Check No.: 82879
By: AMF

Filing Fee: \$50.00

To be filed annually between
September 1 and November 1



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Corporations Division
100 North Main Street Providence, Rhode Island 02903-1335
Telephone (401) 222-3040

LIMITED LIABILITY COMPANY

ID Number FL 94611

Annual Report for the year 1998

1. The name of the limited liability company is:

PowerProducts Systems, LLC

2. The address of the principal office of the limited liability company is:

81 Bay State Road, Wakefield, MA 01880

3. The state or other jurisdiction under the laws of which it is formed is DELAWARE

4. The name and address of its resident agent is: CT CORPORATION SYSTEM

123 DYER STREET PROVIDENCE, RI 02903

5. The current mailing address of the limited liability company and the name or title of a person to whom communications may be directed are: 81 Bay State Road

Wakefield, MA 01880

6. A brief statement of the character of the business in which the limited liability company is actually engaged in this state: sales, installation and servicing of generator units

7. If the limited liability company has managers, the name and address of each manager of the limited liability company

Name

Address

Jeffrey P. Manning

81 Bay State Road

Wakefield, MA 01880

Dated September 17, 19 98



* 9 4 6 1 1 *

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.

PowerProducts Systems, LLC

Exact Name of Limited Liability Company

By Paul J. Belanger

CFO

Title

FOR SECRETARY OF STATE USE ONLY	
File Date:	<u>9.21.98</u>
Check No.:	<u>9153</u>
By:	<u>lup</u>

Form No. LLC-19
Revised 8/97