



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 OR PRINTED IN BLACK)

1. Corporate ID No. 63314		2. Name of Corporation Bay Computer Associates, Inc.			
3. Street Address Principal Business Office 1341 ELMWOOD AVE		City CRANSTON	State RI	Zip 02910	
4. Business Phone No. 401-461-1484		5. State of Incorporation RHODE ISLAND			6. SIC Code 7372
7. Brief Description of the Character of Business Conducted in Rhode Island SOFTWARE DEVELOPMENT AND ELECTRONICS DESIGN					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name DAVID A. DUREE			Vice President Name DAVID P. FREY		
Street Address 52 DEERFIELD DRIVE			Street Address 79 COLUMBIA AVENUE		
City NO. SCITUATE	State RI	Zip 02857	City CRANSTON	State RI	Zip 02905
Secretary Name BERNARD G. QUARTAROLI			Treasurer Name DAVID P. FREY		
Street Address 4 NOTOMIS TRAIL			Street Address 79 COLUMBIA AVENUE		
City SMITHFIELD	State RI	Zip 02917	City CRANSTON	State RI	Zip 02905
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name NONE			Director Name NONE		
Street Address NONE			Street Address NONE		
City NONE	State NONE	Zip NONE	City NONE	State NONE	Zip NONE
Director Name NONE			Director Name NONE		
Street Address NONE			Street Address NONE		
City NONE	State NONE	Zip NONE	City NONE	State NONE	Zip NONE
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
3,000 COMM NO PAR VALUE			NONE		
			NONE		

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



File Date	2-4-05
Check No.	11748
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.

	Feb 3, 2005
Signature of Officer	Date
BERNARD G. QUARTAROLI	
Print or Type Name of Officer	
SECRETARY	
Title of Officer	



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 2004

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

1. Corporate ID No 63314		2. Name of Corporation Bay Computer Associates, Inc.			
3. Street Address Principal Business Office 1341 ELMWOOD AVENUE			City CRANSTON	State RI	Zip 02910
4. Business Phone No 401-461-1484		5. State of Incorporation RHODE ISLAND			6. SIC Code 7872
7. Brief Description of the Character of Business Conducted in Rhode Island SOFTWARE DEVELOPMENT AND ELECTRONICS DESIGN					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name DAVID A. DURFEE			Vice President Name DAVID P. FREY		
Street Address 52 DEERFIELD DRIVE			Street Address 79 COLUMBIA AVENUE		
City NO. SCITUATE	State RI	Zip 02957	City CRANSTON	State RI	Zip 02905
Secretary Name BERNARD G. QUARTAROLI			Treasurer Name DAVID P. FREY		
Street Address 4 NOTHOMIS TRAIL			Street Address 79 COLUMBIA AVENUE		
City SMITHFIELD	State RI	Zip 02917	City CRANSTON	State RI	Zip 02905
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name NONE			Director Name NONE		
Street Address NONE			Street Address NONE		
City NONE	State NONE	Zip NONE	City NONE	State NONE	Zip NONE
Director Name NONE			Director Name NONE		
Street Address NONE			Street Address NONE		
City NONE	State NONE	Zip NONE	City NONE	State NONE	Zip NONE
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
3,000 COMM NO PAR VALUE			2		
			2		

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



* 6 3 3 1 4 *

File Date Feb 26, 2004

Check No. 10451

By: BERNARD G. QUARTAROLI

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.

Bernard G. Quartaroli Feb 26, 2004
Signature of Officer Date

BERNARD G. QUARTAROLI
Print or Type Name of Officer

SECRETARY
Title of Officer



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

Edward S. Inman, III, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040



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. 63314 2. Name of Corporation Bay Computer Associates, Inc.
3. Street Address Principal Business Office 95 HATHAWAY CENTER SUITE 1 City PROVIDENCE State RI Zip 02907
4. Business Phone No. 401-461-1484 5. State of Incorporation RHODE ISLAND 6. SIC Code 7872

7. Brief Description of the Character of Business Conducted in Rhode Island
SOFTWARE DEVELOPMENT + ELECTRONICS DESIGN

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

President Name <u>DAVID A. DURFEE</u> Street Address <u>57 DEERFIELD DR.</u> City <u>NO. SCITUATE</u> State <u>RI</u> Zip <u>02857</u>	Vice President Name <u>DAVID P. FREY</u> Street Address <u>79 COLUMBIA AVE.</u> City <u>CRANSTON</u> State <u>RI</u> Zip <u>02905</u>
Secretary Name <u>BERNARD G. QUARTAROLI</u> Street Address <u>4 NOKOMIS TRAIL</u> City <u>ESMOND</u> State <u>RI</u> Zip <u>02917</u>	Treasurer Name <u>DAVID P. FREY</u> Street Address <u>79 COLUMBIA AVE.</u> City <u>CRANSTON</u> State <u>RI</u> Zip <u>02905</u>

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

Director Name <u>NONE</u> Street Address <u>NONE</u> City _____ State _____ Zip _____	Director Name <u>NONE</u> Street Address <u>NONE</u> City _____ State _____ Zip _____
Director Name <u>NONE</u> Street Address <u>NONE</u> City _____ State _____ Zip _____	Director Name <u>NONE</u> Street Address <u>NONE</u> City _____ State _____ Zip _____

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

AUTHORIZED SHARES

Number of Shares	Class/Series	Par Value
<u>3,000 COMM NO PAR VALUE</u>		

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

ISSUED SHARES

Number of Shares	Class/Series	Par Value
<u>NONE</u>		



* 6 3 3 1 4 *

File Date: 1-24-03
Check No.: 9115
By: UP

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.

Bernard G. Quartaroli JAN 17, 2003
Signature of Officer Date

BERNARD G. QUARTAROLI
Print or Type Name of Officer

SECRETARY
Title of Officer



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

Edward S. Inman, III, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040



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. **63314** 2. Name of Corporation **Bay Computer Associates, Inc.**
3. Street Address Principal Business Office **95 HATHAWAY CENTER SUITE 1** City **PROVIDENCE** State **RI** Zip **02907**
4. Business Phone No. **401-461-1484** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **7872**
7. Brief Description of the Character of Business Conducted in Rhode Island

SOFTWARE DEVELOPMENT + ELECTRONICS DESIGN

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

President Name DAVID A. DUFFEE Street Address 57 DEERFIELD DR. City NO. SCITUATE State RI Zip 02857	Vice President Name DAVID P. FREY Street Address 79 COLUMBIA AVE City CRANSTON State RI Zip 02905
Secretary Name BERNARD G. QUARTAROLI Street Address 4 NICHOMIS TRAIL City ESMOND State RI Zip 02917	Treasurer Name DAVID P. FREY Street Address 79 COLUMBIA AVE. City CRANSTON State RI Zip 02905

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

Director Name NONE Street Address City State Zip	Director Name NONE Street Address City State Zip
Director Name NONE Street Address City State Zip	Director Name NONE Street Address City State Zip

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

AUTHORIZED SHARES

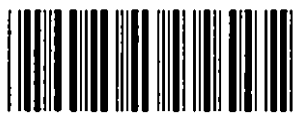
Number of Shares	Class/Series	Par Value
3,000 COMM NO PAR VALUE		

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

ISSUED SHARES

Number of Shares	Class/Series	Par Value
NONE		

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



* 6 3 3 1 4 *

File Date: **2/4/02**
Check No.: **7881**
By: **QES**

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 **Bernard G. Quartaroli** Date **JAN 31, 2002**

BERNARD G. QUARTAROLI

Print or Type Name of Officer

SECRETARY

Title of Officer

5

Form 630 12/01



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

Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040



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. **63314** 2. Name of Corporation **Bay Computer Associates, Inc.**
3. Street Address Principal Business Office **95 Hathaway Center Suite 1 Providence RI 02907**
4. Business Phone No. **401-461-1484** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **7872**

7. Brief Description of the Character of Business Conducted in Rhode Island

Software Development + Electronics Design

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

President Name David A. Durfee	Vice President Name David P. Frey
Street Address 52 Deerfield Drive	Street Address 79 Columbia Ave
City No. Scituate	City Cranston
State RI	State RI
Zip 02857	Zip 02905
Secretary Name BERNARD G. QUARTAROLI	Treasurer Name David P. Frey
Street Address P.O. Box 288	Street Address 79 Columbia Ave
City GREENVILLE	City Cranston
State RI	State RI
Zip 02828	Zip 02905

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

Director Name NONE	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)

AUTHORIZED SHARES

Number of Shares Class/Series Par Value

3,000 SHS COM NO PAR VAL

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

ISSUED SHARES

Number of Shares Class/Series Par Value

0



* 6 3 3 1 4 *

File Date: **4-30-01**

Check No.: **7257**

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] March 1, 2001
Signature of Officer Date

BERNARD G. QUARTAROLI
Print or Type Name of Officer

SECRETARY
Title of Officer



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

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040



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. **63314** 2. Name of Corporation **Bay Computer Associates, Inc.**
3. Street Address Principal Business Office **95 HATHAWAY CENTER SUITE 1 PROVIDENCE RI 02907**
4. Business Phone No. **401-461-1484** 5. State of Incorporation **RHODE ISLAND**
6. SIC Code **7872**

7. Brief Description of the Character of Business Conducted in Rhode Island **CONTRACT DESIGN OF ELECTRONICS AND SOFTWARE**
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) **FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name DAVID A. DUFFEE Street Address 52 DEERFIELD DR. City NO. SCITATE State RI Zip 02857 Secretary Name BERNARD G. QUARTAROLI Street Address 4 NOTTOMIS TRAIL City SMITHFIELD State RI Zip 02919	Vice President Name DAVID P. FREY Street Address 79 COLUMBIA AVE. City CRANSTON State RI Zip 02905 Treasurer Name DAVID P. FREY Street Address 79 COLUMBIA AVE. City CRANSTON State RI Zip 02905
---	---

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

Director Name NONE Street Address City State Zip Director Name Street Address City State Zip	Director Name Street Address City State Zip
---	---

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

AUTHORIZED SHARES	Number of Shares	Class/Series	Par Value
	3,000 SHS COM NO PAR VAL		

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

ISSUED SHARES	Number of Shares	Class/Series	Par Value
	NONE		

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



* 6 3 3 1 4 *

PAID

File Date: **JAN 31 2000**

Check No.: **5854** **SECRETARY OF STATE**

By: **GAP**

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 **David A. Duffee** Date **12/22/99**

Print or Type Name of Officer **David A. Duffee**

Title of Officer **President**



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

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040

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. 63314		2. Name of Corporation Bay Computer Associates, Inc.	
3. Street Address Principal Business Office 95 HATHAWAY CENTER, SUITE 1		City PROVIDENCE	State RI
4. Business Phone No. 461-1484		5. State of Incorporation RHODE ISLAND	6. SIC Code 7872
7. Brief Description of the Character of Business Conducted in Rhode Island ELECTRONIC DESIGN AND SOFTWARE DESIGN			
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) • FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name DAVID A. DUFFEE		Vice President Name DAVID P. FREY	
Street Address 52 DEERFIELD DRIVE		Street Address 79 COLUMBIA AV	
City NO SCITUATE	State RI	City CRANSTON	State RI
Zip 02857		Zip 02905	
Secretary Name BERNARD G. QUARTAROLI		Treasurer Name DAVID A. DUFFEE	
Street Address PO BOX 288		Street Address 52 DEERFIELD DRIVE	
City GREENVILLE	State RI	City NO SCITUATE	State RI
Zip 02828-0288		Zip 02857	
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) • FILL IN SPACES BEFORE USING ATTACHMENTS			
Director Name NONE		Director Name NONE	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
Director Name NONE		Director Name NONE	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)		11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)	
AUTHORIZED SHARES		ISSUED SHARES	
Number of Shares	Class/Series	Number of Shares	Class/Series
3,000 SHS COM NO PAR VAL		1500	Common
Par Value		Par Value	0

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



* 6 3 3 1 4 *

File Date: Feb 26, 99
Check No.: 4841
By: JD

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: David A. Duffee Date: 2/16/99
Print or Type Name of Officer: DAVID A. DUFFEE
Title of Officer: PRESIDENT



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

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-277-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1998

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **63314** 2. Name of Corporation **Bay Computer Associates, Inc.**

3. Street Address Principal Business Office **95 HATHAWAY CENTER SUITE 1** City **PROV** State **RI** Zip **02907**

4. Business Phone No. **401-461-1484** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **7872**

7. Brief Description of the Character of Business Conducted in Rhode Island
CONTRACT ELECTRONICS AND SOFTWARE DESIGN

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT)

President Name DAVID A. DURFEE	Vice President Name DAVID P. FREY
Street Address 52 DEERFIELD DR	Street Address 79 COLUMBIA AVE
City NO. SCITUATE	City CRAWSTON
State RI	State RI
Zip 02857	Zip 02905
Secretary Name BERNARD G. QUARTAROLI	Treasurer Name DAVID P. FREY
Street Address 4 NOKOMIS TRAIL	Street Address 79 COLUMBIA AVE
City SMITHFIELD	City CRAWSTON
State RI	State RI
Zip 02917	Zip 02905

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT)

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)

AUTHORIZED SHARES
Number of Shares Class/Series Par Value

3,000 SHS COM NO PAR VAL

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

ISSUED SHARES
Number of Shares Class/Series Par Value

X

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



File Date: **3.13.98**
Check No.: **3572**
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] Date **Feb 12, 1998**

BERNARD G. QUARTAROLI

Print or Type Name of Officer

SECRETARY
Title of Officer



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

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-277-3040



PROFIT CORPORATION ANNUAL REPORT 1997

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **63314** 2. Name of Corporation **Bay Computer Associates, Inc.**

3. Street Address Principal Business Office **95 Hathaway Center, Suite 1** City **Providence** State **RI** Zip **02907**
4. Business Phone No. **461-1484** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **7373** *Note more appropriate SIC code*

7. Brief Description of the Character of Business Conducted in Rhode Island
Contract electronics & software design

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT)

President Name David A Durfee Street Address 52 Deerfield Dr. City N. Scituate State RI Zip 02857 Secretary Name David A Durfee Street Address City State Zip	Vice President Name David P Frey Street Address 79 Columbia Ave City Cranston State RI Zip 02905 Treasurer Name David P Frey Street Address City State Zip
--	---

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT)

Director Name David A Durfee Street Address City State Zip	Director Name David P Frey Street Address City State Zip
Director Name Street Address City State Zip	Director Name Street Address City State Zip

10. SHARES AUTHORIZED AND ISSUED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
3,000 SHS COM NO PAR VAL			1500	COM	NO PAR VAL

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



File Date: **2/18/97**
Check No.: **2086**
By: **UD**
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.

David A Durfee **2/13/97**
Signature of Officer Date
President - David A Durfee
Print or Type Name of Officer
Title of Officer

PROFIT CORPORATION ANNUAL REPORT

1996



State of Rhode Island and Providence Plantations
James R. Langevin, Secretary of State
Corporations Division
100 North Main Street
Providence, Rhode Island 02903-1335 • (401) 277-3040

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

PLEASE TYPE OR PRINT IN BLACK INK.

1. CORPORATE ID NO. 63314		2. NAME OF CORPORATION Bay Computer Associates, Inc.	
3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE 765 ALLENS AVE		CITY PROVIDENCE	STATE RI
4. BUSINESS PHONE NO. (401) 454-8595		5. STATE OF INCORPORATION RHODE ISLAND	6. SIC CODE 7872

7. BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE ISLAND
COMPUTER PROGRAMMING & ELECTRONICS DESIGN

8. NAMES AND ADDRESSES OF THE OFFICERS			
PRESIDENT NAME KRIS D. PENNISTEN		VICE PRESIDENT NAME DAVID P. FREY	
STREET ADDRESS 59 SEAVIEW AVE		STREET ADDRESS 19 MARION AVE	
CITY SWANSEA	STATE MA	CITY CRANSTON	STATE RI
ZIP CODE 02777		ZIP CODE 02905	
SECRETARY NAME KRIS PENNISTEN		TREASURER NAME KRIS PENNISTEN	
STREET ADDRESS		STREET ADDRESS	

9. NAMES AND ADDRESSES OF THE DIRECTORS			
DIRECTOR NAME DAVID A. DUFFEE		DIRECTOR NAME	
STREET ADDRESS 52 DEERFIELD DRIVE		STREET ADDRESS	
CITY N. SCITUATE	STATE RI	CITY	STATE
ZIP CODE 02857		ZIP CODE	
DIRECTOR NAME		DIRECTOR NAME	
STREET ADDRESS		STREET ADDRESS	
CITY	STATE	CITY	STATE
ZIP CODE		ZIP CODE	

10. SHARES AUTHORIZED AND ISSUED					
AUTHORIZED SHARES			ISSUED SHARES		
NUMBER OF SHARES	CLASS / SERIES	PAR VALUE	NUMBER OF SHARES	CLASS / SERIES	PAR VALUE
3,000 SHS COM NO PAR VAL			3000	COMMON	NONE

This report must be **SIGNED IN INK** by either the
President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

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.

File Date:

2/2/96

Check No:

4781

By:

cc/fup

For Secretary of State Use Only

Signature of Officer

KRIS D. PENNISTEN

Print or Type Name of Officer

PRESIDENT

Title of Officer

1/31/96

Date

State of Rhode Island and Providence Plantations



Office of The Secretary of State
100 North Main Street
Providence, Rhode Island 02903-1335
401-277-3040

ANNUAL REPORT

Please Type or Print
File Annually - Jan. 1 - March 1
Filing Fee \$50.00

Make Checks Payable to: Secretary of State

ALL ENTRIES MUST BE COMPLETED IN FULL OR THE FORM WILL BE RETURNED.

Corporate ID: 0053314 Annual Report for the year: 1995

Name of Corporation: Bay Computer Associates, Inc.

Business entity organized under the laws of the State of: RI

For foreign entity, address and telephone number of principal office:

NA

Phone: ()

Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box):

765 ALLENS AVE
PROVIDENCE, RI 02905

Phone: (401) 454-8595

Business Entity is (check one):

☒ Business Corporation (See RIGL Chapter 7-1.1)

☐ Professional Service Corporation (See RIGL Chapter 7-5.1)

Brief statement of the character of business conducted in Rhode Island:

SOFTWARE DEVELOPMENT AND
ELECTRONIC DESIGN

THE NAMES OF THE OFFICERS ARE:

	STREET ADDRESS	CITY/STATE	ZIP CODE
PRESIDENT, TREASURER, SECRETARY <u>KRIS D. PENNISTEN</u>	<u>59 SEAVIEW AVE</u>	<u>SWANSEA, MA</u>	<u>02777</u>
VICE PRESIDENT <u>DAVIDA, DURFEE</u>	<u>52 DEERFIELD DR.</u>	<u>N. SCITUATE RI</u>	<u>02857</u>
SECRETARY UP <u>DAVID FLEY</u>	<u>19 MARION AVE.</u>	<u>CRANSTON RI</u>	<u>02905</u>
UNDESIGNATED SECRETARY UP UP			

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
<u>SAME</u>			

NUMBER OF SHARES AUTHORIZED (Rider may be attached)

Number of Shares 3000 Class / Series COMMON

NUMBER OF SHARES ISSUED AND OUTSTANDING (Rider may be attached)

Number of Shares NA Class / Series

?

1001#30
3551

Date JAN 10, 19 95

By: KRIS D. PENNISTEN

PRINT OR TYPE NAME OF OFFICER SIGNING

TITLE OF OFFICER SIGNING PRESIDENT

Form 31 1/95

DESIGNATED REGISTERED AGENT FOR SERVICE OF PROCESS:

PLEASE NOTE: If the registered office and/or registered agent indicated below is incorrect, Form 9 must be filed.

KRIS D. PENNISTEN
765 ALLENS AVENUE
PROVIDENCE RI 02905

Filing Fee \$50.00
Payable to:
Secretary of State

PLEASE TYPE or PRINT
State of Rhode Island and Providence Plantations
Office of The Secretary of State
100 North Main Street
Providence, Rhode Island 02903-1335
401-277-3040

File Annually
LLC: Sept. 1 - Nov. 1
CORP: Jan. 1 - March 1

Corporate ID: 0063514 Annual Report for the year: 1994

Name of Business Entity: Bay Computer Associates, Inc.

Business entity organized under the laws of the State of: RI

Federal Taxpayer Identification Number: [REDACTED]

For foreign entity, address and telephone number of principal office:

- N.A. -

Phone: ()

Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box):

765 ALLENS AVE
PROVIDENCE, RI 02905

Phone: 401 454-8595

Business Entity is (check one):

- ☒ Business Corporation (See RIGL Chapter 7-1.1)
☐ Professional Service Corporation (See RIGL Chapter 7-5.1)
☐ Limited Liability Company (See RIGL 7-16)

Name, title and mailing address of contact person to whom communications may be directed:

KRIS D. PENNISTEN, PRESIDENT
BAY COMPUTER ASSOCIATES INC.
765 ALLENS AVE
PROVIDENCE, RI 02905

Brief statement of the character of business conducted in Rhode Island:

SOFTWARE DEVELOPMENT AND
ELECTRONIC DESIGN

Date of Organization: 8 FEB 1991

Date of Qualification to do business in Rhode Island (if foreign entity):

THE NAMES OF THE OFFICERS ARE:

☐ CHIEF EXECUTIVE OFFICER OR ☒ PRESIDENT (Check One) STREET ADDRESS CITY/STATE ZIP CODE

KRIS D. PENNISTEN 59 JEFFERSON AVE SWANSETT, MA 02777

☐ CHIEF OPERATING OFFICER OR ☐ VICE PRESIDENT (Check One) STREET ADDRESS CITY/STATE ZIP CODE

☐ CUSTODIAN OF RECORDS OR ☐ SECRETARY (Check One) STREET ADDRESS CITY/STATE ZIP CODE

☐ CHIEF FINANCIAL OFFICER OR ☐ TREASURER (Check One) STREET ADDRESS CITY/STATE ZIP CODE

THE NAMES OF THE DIRECTORS ARE:

NAME STREET ADDRESS CITY/STATE ZIP CODE

SAME

NAME STREET ADDRESS CITY/STATE ZIP CODE

NAME STREET ADDRESS CITY/STATE ZIP CODE

NUMBER OF SHARES AUTHORIZED (If Applicable)

NUMBER 3000

CLASS COMMON

SERIES

PAR VALUE OR WITHOUT PAR NO PAR VALUE

NUMBER OF SHARES ISSUED AND OUTSTANDING (If Applicable)

NUMBER NA

CLASS

SERIES

PAR VALUE OR WITHOUT PAR

Date MARCH 1 19 94

FILED

MAR 08 1994

By CCA 2892

By [Signature]

KRIS D. PENNISTEN

PRINT OR TYPE NAME OF OFFICER SIGNING

PRESIDENT

TITLE OF OFFICER SIGNING

Form 31 1/94

DESIGNATED REGISTERED OR RESIDENT AGENT FOR SERVICE OF PROCESS:

PLEASE NOTE: If the Corporation has changed its registered office and/or registered or resident agent, Form 9 or Form LLC 3 must be filed

KRIS D. PENNISTEN
1 RICHMOND SQUARE
PROVIDENCE RI 02906

Filing Fee \$50.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

1993

Corporate ID 0053314

Annual Report for the year 1993

FIRST: The name of the corporation is Bay Computer Associates, Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is Computer design

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 1 Richmond Square, Providence

SIXTH: Names and addresses of its directors and officers:

(Attach rider if necessary)

Name

Office

Address (including number, street, zip code)

Director

Director

Director

Kris D. Pennisten President

59 Seaview Ave. , Swansea MA 02777

same

Vice President

same

Secretary

same

Treasurer

SEVENTH: Number of Shares authorized:

No. of Shares

Class

3000

Common

Series 01 1993

SECY OF STATE

Par Value
or statement that
shares are without
par value

No par value

EIGHTH: Number of Shares issued:

No. of Shares

Class

3000

Common

Series

Par Value
or statement that
shares are without
par value

No par value

Dated January 28 19 93

Bay Computer Associates, Inc.
(Name of Corporation)

By Kris D. Pennisten

Title President

(Report must be signed by an officer)

Filing Fee \$50.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

1276 R.O.

Corporate ID 0053314 Annual Report for the year 1992

FIRST: The name of the corporation is Bay Computer Associates, Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is Computer Software and Hardware
Development

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 1 Richmond Square, Providence, RI 02906

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name

Office

Address (including number, street, zip code)

Director

Director

Director

Kris D. Pennisten President 59 Seaview Ave, Swansea, MA 02777

(Same) Vice President

(Same) Secretary

(Same) Treasurer

SEVENTH: Number of Shares authorized:

No. of Shares

Class

Series

Par Value
or statement that
shares are without
par value

3000

Common

PAID

No par value

EIGHTH: Number of Shares issued:

No. of Shares

Class

Series

Par Value
or statement that
shares are without
par value

3000

Common

No par value

Dated March 1 19 92

Bay Computer Associates, Inc.
(Name of Corporation)

By [Signature]

(Report must be signed by an officer)

Title Kris D. Pennisten - President