

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

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

Form 630 Rev. 12/03

2005

Matthew A. Brown, Secretary of State

#### PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR \_\_\_\_\_

Filing Period: January 1 - March 1 \_\_ • Filing Fee: \$50.00 (FORM MUST BE TYPED OR PRINTED IN BIACK) 2. Name of Corporation 1. Corporate ID No. 918 AMERICAN PAYROLL SERVICE, LTD. Zip 3. Street Address Principal Business Office City RI02919 Johnston 75 Railroad Avenue 6. SIC Code 5. State of Incorporation 4. Business Phone No. 401-232-7200 7658 RHODE ISLAND 7. Brief Description of the Character of Business Conducted in Rhode Island TO CONDUCT A PAYROLL SERVICE ☐ FILL IN SPACES BEFORE USING ATTACHMENTS 8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) Vice President Name President Name D. Randy Hill None Street Address Street Address RFD #1, Box 331-A Ζip State 02814 Chepachet Treasurer Name Secretary Name Louis A. Pieroni Joseph T. Little Street Address Street Address 225 Waterman Avenue 21 Mink Road Providence RΙ 02914 Providence RI02908 FILL IN SPACES BEFORE USING ATTACHMENTS 9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) Director Name \*NO BOARD OF DIRECTORS Street Address Street Address ZID City Mate Director Name Director Name Street Address Street Address State Zip City State Zip 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) 10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) ISSUED SHARES AUTHORIZED SHARES Number of Shares Class/Senes Par Value Number of Shares Par Value Class/Series 2,000 COMM NO PAR VALUE 100 Common No Par Value 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 agraccompanying schedules and statements, and that all statements figin are true, and correct. contained 1/18/2005 Joseph T. Print or Type Name of Officer Secretary FOR SECRETARY OF STATE USE ONLY

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

Corporate ID No.	2. Name of Corpor				
918		PAYROLL SERVICE, LTD		16.	7:-
<i>Street Address Principal Busine</i> 75 Railroad Avenu			Johnston		02919
Business Phone No.	<u> </u>	5. State of Incorporation			6. SIC Code
401-232-7200		RHODE ISLAND			7658
Brief Description of the Chame TO CONDUCT A PAYE					
. NAMES AND ADDRESS	ES OF THE OFFICE	ERS: ("X" BOX FOR AT	TACHMENT)     FILL IN	SPACES BEFORE USIN	G ATTACHMENTS
resident Name			Vice President Name		
D. Randy Hill			None		
itreet Address		<del>.</del>	Street Address	<del>.</del>	
RFD #1, Box 331- <i>F</i>	1				,
Sity	State	Zip	City	State	ZIP
Chepachet	l RI	02814			
Secretary Name			Louis A. Piero	nni	
Joseph T. Little Greet Address		<del></del>	Street Address	<del></del>	
	2112		21 Mink Road		
225 Waterman Ave	Siale	7/5	: City	State .	7/0
<sub>City</sub> East Providence	RI	02914	Providence		102908
). NAMES AND ADDRESS		1	•		•
Director Name			Director Name		
* NO BOARD OF D	IRECTORS				
Street Address			Street Address		
City	State	Zip	City	State	Z(p
	J				
Director Name			Director Name		
Strout Address		<u> </u>	Street Address		
SITE NAUTS			Sireer Materiess		
City	State	Zip	City	State	Zip
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10. SHARES AUTHORIZE	D ("X" BOX FOR	ATTACHMENT) [	11. SHARES ISSUED	("X" BOX FOR ATTACE	HMENT) 🗌
AUTHORIZED SHARES	·		ISSUED SHARES		_
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
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2,000 COMM NO PAR VA	LUE		100	FILL IN SPACES BEFORE USING ATTACH  State    State   Zip	NO par varu
		- · · · · -			
This report must I	be signed in ink by	either the President, Vic	e President, Secretary, Assis	tant Secretary, Treasurer	. Receiver or Trustee
1188	HA HACEN HAAN HEN HAAN				
			Under penalty of r	serjury, I declare and affirm	that I have examined this r
1100	0 1 8 +				
0.00	04		confairled herein a	re true and correct.	$\sim$ $\rho$
File Date	.09		mool	1 7. Kin	1/21/20
1	пал	<del>-</del>	Signature of Officer		Date
Check No.	11 10	_			
/(1/)				<del></del>	··
Ву:		<u> </u>		o Officer	
FOR SECRETARY OF	STATE USE ON V		Secretary		
FOR BECKEIART UP	SIMIL USE ONLI	1	Title of Officer	· · · · · · · · · · · · · · · · · · ·	

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

### PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003

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

(FORM MUST BE TYPED OR PRINTED IN BLACK) 1. Corporate ID No.

2. Name of Corporation

918

AMERICAN PAYROLL SERVICE, LTD.

3. Street Address Principal Business Office

75 Railroad Avenue.

City Johnston State RI

02919

4. Business Phone No.

5. State of Incorporation

6. SIC Code

401-232-7200

RHODE ISLAND

7658

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

to conduct a payroll service

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

President Name

D. Randy Hill

Street Address

RFD #1, Box 331-A

Secretary Name

Street Address

State

02914

City

State

Zip

Chepachet

RΙ

Treasurer Name

Vice President Name

None

Street Address

Louis A. Pieroni

Street Address

21 Mink Road

East Providence

225 Waterman Avenue

Joseph T. Little

RI

02914

City Providence

RT

ິດ2908

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

\* NO BOARD OF DIRECTORS

Street Address

Cliv

State

City

Street Address

State

Zip

Director Name

Director Name

Street Address

Street Address

City

State

Zip

City

State

Zip

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

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

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

Class/Series

Par Value

2,000 COMM NO PAR VALUE

100

Number of Shares

Common

No par value

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



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.

Joseph T. Little Print or Type Name of Officer

<u>Secretary</u> Title of Officer

**₩** 5

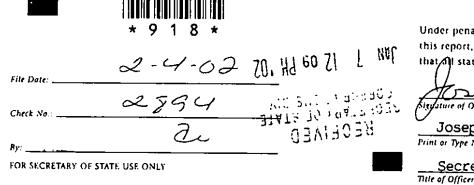
Form 630 12/02

#### 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) L. Corporate ID No. 2. Name of Corporation 918 AMERICAN PAYROLL SERVICE, LTD. 3. Street Address Principal Business Office City State Zip 72 Railroad Avenue Johnston 02919 RI 4. Business Phone No. 5. State of Incorporation 6. SIC Code 401-232-7200 RHODE ISLAND 7658 7. Brief Description of the Character of Business Conducted in Rhode Island to conduct a payroll service 8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS President Name D. Randy Hill None Street Address Street Address RFD #1, Box 331-A City State . City State ZIp 02914 Chepachet RI Secretary Name Treasurer Name Joseph T. Little Louis A. Pieroni Street Address Street Address 225 Waterman Avenue 21 Mink Road Cin Zio State Z.ip East Providence RI 02914 Providence RT 02908 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Director Name Director Name \*NO BOARD OF DIRECTORS Street Address Street Address City State 210 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 ESUED) SHARES Number of Shares Class/Series Number of Shares Class/Series Par Value 2,000 COMM NO PAR VALUE 100 common no par value

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

5



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. <del>1/23/2002</del> Joseph T. Little Print or Type Name of Officer <u>Secretary</u>

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 •	Filling Fee: \$50.00			INSTRUCTIONS
FORM MUST BE TYPED IN BLA	CK)				
1. Corporate ID No. <b>918</b>	2. Name of Corpora AMERICAN	tion PAYROLL SERVIC	E, LTD.		
3. Street Address Principal Business	Office		City	State	Zip
75 Railroad A	venue	5. State of Incorporation		. RI	02919 6. SIC Cade
401-232-7200 7. Brief Description of the Character	of Business Conducted i	RHODE ISLA n Rhode Island	ND		7658
to conduct a		· · · · · · · · · · · · · · · · · · ·			
8. NAMES AND ADDRES President Name	SES OF THE OFF	CERS (*X* BOX FOR ATT	Vice President Name	BEFORE USING ATTAC	HMENTS
D. Randy Hil Street Address	1		None Street Address	•	
Gity RFD #1, Box	331-A State	Zip	City	State	Zip
Chepachet Secretary Name	RI	02814	Treasurer Name		
Francis E. L	ittle, Jr.		Louis A. Pi	leroni	
225 Waterman	Avenue		21 Mink Roa	ad	
City	State	Zip	City	State	Zip
East Provide 9. NAMES AND ADDRES Director Name		02914 ECTORS (*X* BOX FOR A	Providence TTACHMENT) FILL IN SPACI Director Name	R I ES BEFORE USING ATTA	02908 ACHMENTS
*NO BOARD OF	DIRECTORS				•
Street Address			Street Address		
Clty	State	Zip	City	State	Zip
Director Name			Director Name	•	•
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZE AUTHORIZED SHARES	D ("X" BOX FOR ATT	ACHMENT)	11. SHARES ISSUED (	"X" BOX FOR ATTACHMENT	)
Number of Shares	Class/Serles	Par Value	Number of Shares	Closs/Series	Par Value
2,000 COMM NO PA	AR VALUE		100	common	no par value

irer, Receiver or Trustee

This report must be signed in ink by either the Presi	dent, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee
* 9 1 8 *	Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and
Eile Date:	typy all statements contained how there true and correct.
Check No.: 2247	All 2/14/01 Striature of Officer Date
Te Br:	Francis E. Little / Jr.  Print or Type Name of Officer
FOR SECRETARY OF STATE USE ONLY	Secretary Tule of Officer

E--- 420 1200

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.

2. Name of Corporation

918

AMERICAN PAYROLL SERVICE, LTD.

3. Street Address Principal Business Office	City		State	ZIP
75 Railroad Avenue		Johnston	RI	02919
4. Business Phone No.	5. State of Incorporation			6. SIC Code

232-7200

RHODE ISLAND

7658

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

to conduct a payroll service

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

Vice President Name President Name

D. Randy Hill

None Street Address

RFD #1, Box 331-A

City

Zip

City

State

State

Zip

Secretary Name

Street Address

Chepachet RI 02814

Treasurer Name

Francis E. Little, Jr.

Louis A. Pieroni

Street Address

225 Waterman Avenue State

Zip

21 Mink Road

East Providence

RI

02914

Providence

RI

02908

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

Director Name

Director Name

\*No Board of Directors

Street Address

Street Address

City

City

State

Zip

City

State

Zip

Zip

Director Name

Director Name

Street Address

Zip

City

State

Zio

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

AUTHORIZED SHARES Number of Shares

Class/Series

State

Par Value

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

ESTARIES CLEURZS

Street Address

Number of Shares

Class/Series

Par Value

2,000 COMM NO PAR VALUE

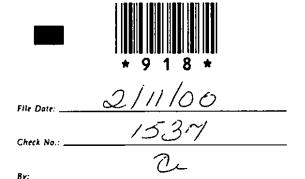
FOR SECRETARY OF STATE USE ONLY

100

Common

No Par Value

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 ue and correct. Date inature of Officer 1/18/2000 Francis E. Little, Jr. Print or Type Name of Officer Secretary



Title of Officer

James R. Langevin, Secretary of State 100 North Main Street, Providence, RI 02903-1335

### Corporations Division 401-222-3040

### PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1999

Filing Period: January	I-March I •	Filing Fee: \$50.00			INSTRUCTIO	iss
(FORM MUST BE TYPED IN BLAC	(K)					
1. Corporate ID No 918	2. Name of Corpora.  AMERICAN	<sup>ilon</sup> PAYROLL SERVICI	E, LTD.			
3. Street Address Principal Business O	Office		City	State	Zip	1
75 Railroad Av	enue	S. State of Incorporation		RI	02919 6. SIC Code	1
232-7200 7. Brief Description of the Character of	of Business Conducted i	RHODE ISLA n Rhode Island	ND		6882	•
to c	onduct a p	ayroll servi	ce			1
8. NAMES AND ADDRESS	ES OF THE OFFI	CERS ("X" BOX FOR ATT		BEFORE USING ATTAC	CHMENTS	٠
President Name D. Randy Hill			Vice President Name None			
Street Address			Street Address			-
RFD #1, Box 33	1 _ A		Stitle Modelly			
City	State	Zip	City	State	Zip	
Chepachet Secretary Name	RI	02814	Treasurer Name		· · · · · · · · · · · · · · · · · · ·	
Francis E. Lit	tle, Jr.		Louis A. Pier	oni		
225 Waterman A	venue		21 Mink Road			
City	State	Zip	Clly	State	- Zip	
E. Providence	RI	02914	Providence	RI	02908	
9. NAMES AND ADDRESS	ES OF THE DIRI	CTORS ("X" BOX FOR A	TTACHMENT) FILL IN SPACE	S BEFORE USING ATTA	ACHMENTS	
Director Name			Director Name			
*NO BOARD OF Street Address	DIRECTORS		NONE Street Address			•
City	State	Zip	Gity	State	Zip	
Director Name	••	*** * ** ** **	Director Name	······································	******************************	••••
NONE			NONE			
Street Address			Street Address		•	
City	State	Zip	City	State	Zip	•
10. SHARES AUTHORIZED AUTHORIZED SHARES	) (*X* BOX FOR ATT	ACHMENT)	11. SHARES ISSUED (*.	X" BOX FOR ATTACHMENT	r)	•
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value	
2,000 COMM NO PAR	VALUE		100	common	no par val	112
·			100		pur vu	
771-1				_ ~		
inis report must be signe	a in ink by eith	ner the President, Vic	e President, Secretary, Assis	stant Secretary, Treas	urer, Receiver or Trus	tee

	* 9 1 8 *
File Date:	Leb 8199
Check No.:	9500
By:	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 and correct. that all statements contained herein assettue Signature of Officer Dafe Secretary Francis E. Print or Type Name of Officer

Title of Officer



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

#### PROFI Filing Pe

T CORPORATION		FOR TH	IE YEAR	1998	STOP PLEASE READ INSTRUCTIONS
BE TYPED IN BLACK)					
No. 2 Name of Cornera	ition				

(FORM MUST 1. Corporate ID No. AMERICAN PAYROLL SERVICE, LTD. 918 3. Street Address Principal Business Office State Zip 02886 Warwick RI 2800 Post Road 6. SIC Code 4. Business Phone No. 5. State of Incorporation RHODE ISLAND 6882 738-0833 7. Brief Description of the Character of Business Conducted in Rhode Island to conduct a payroll service 8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) President Name Vice President Name None D. Randy Hill Street Address Street Address RFD #1, Box 331-A City State Zip City State Zip 02814 RΙ Chepachet . Treasurer Name Secretary Name Francis E. Little, Jr. Louis A. Pieroni Street Address Street Address 225 Waterman Avenue 21 Mink Road Zip State 02908 02914 Providence RI RΙ E. Providence 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) Director Name Director Name \*No Board of Directors NONE Street Address Street Address Zip CIIV 210 City State State Director Name Director Name NONE NONE Street Address Street Address City State Zip City State ZIP 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) 10. SHARES AUTHORIZED (\*X\* BOX FOR ATTACHMENT) ISSUED SHARES AUTHORIZED SHARES

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

Par Value

Number of Shares

100

Title of Officer

	* 9 1 8 *
File Date:	J. 20.98
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Ву:	100
FOR SECRETAR	RY OF STATE USE ONLY

Class/Series

Number of Shares

2000 COM NO PAR VAL

Under penalty of perjuly, I declare and affirm that I have examined this report including any accompanying schedules and statements, and I statements contained herein are true and correct. 1/&ፈ/98

Par Value

No Par Value

Stenature of Officer D. Randy Hill

Class/Series

Common

Print or Type Name of Officer President



James R. Langevin, Secretary of Stay Corporations Division 100 North Main Street, Providence, Rt 02903-1339.

## 401-277-3040

Zip

#### PROFIT CORPORATION ANNUAL REPORT 1997

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

(FORM MUST BE TYPED IN BLACK)

I. Corporate ID No.

2. Name of Corporation

918

AMERICAN PAYROLL SERVICE, LTD.

3. Street Address Principal Business Office State Zip 28 00 Post Road Warwick RI 02888 4. Business Phone No. 5. State of Incorporation 6. SIC Code RHODE ISLAND 6882 738-0833

none

Clly

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

to conduct a payroll service

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

President Name Vice President Name D. Randy Hill Street Address Street Address

RFD #1, Box 331-A

Zip 02814 RI Chepachet

Treasurer Name Francis E. Little, Jr. Louis A. Pieroni Street Address Street Address

225 Waterman Avenue 21 Mink Road

City State State

02914 02908 RI E. Providence RΙ Providence

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

Director Name

\* No Board of Directors None Street Address Street Address

City State City State Zip

Director Name **Director Name** 

None None Street Address Street Address

City Zip State City State Zip

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

AUTHORIZED SHARES ISSULED) SHARES

Number of Shares Class/Series Par Value Number of Shares Par Value Class/Series

2000 COM NO PAR VAL 100 No Par Value. Common

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



File Date:

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, instituting any ascompanying schedules and statements, and

State

<u>Randy Hill</u>

Print or Type Name of Officer President

Title of Officer

#### **PROFIT CORPORATION ANNUAL REPORT**

1996



D. Randy Hill

President

Title of Officer

Print or Type Name of Officer

1/26/96

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

Check No:

By:

iling Fee: \$50.00		PLEASE TYPE OR	PRINT IN BLACK INK.		
CORPORATÉ ID NO.	2 NAME OF CORPORATION			<del></del>	
918	AMERI	CAN PAYROLL SER	VICE, LTD.		
STREET ADDRESS PRINCIPAL BUSINESS OFFICE			an	STATE	ZIP COOE
1845 Post	Road		Warwick	RI	02888
RUSINESS PHONE NO.	<del>·</del>	S. STATE OF INCORPORATION	<del></del>	<del></del>	
505 0000		RHODE I	SLAND		6882
738-0833 Brief description of the Character of Bris	เการ์ เการารายกับกับกับการการ	rci Aun	<del></del>		
	i a payro	oll service			
	8. N A	MES AND ADDR		FICERS	
SKIENT NAME			VICE PRESIDENT NAME		
D. Randy Hill	<del> </del>	<del> </del>	None STREET ADDRESS	<u> </u>	
RFD #1, Box 331-	_ <b>λ</b>		2 LAFE L ADDRESS		
	STATE	T ZIP CODE	OTY	STATE	T ZIP CODE
Chepachet :	RI	02814	· wiii	, Jinie	· AF OOCE
RETARY HAVE			TREASURER HAME		
Francis E. Littl	le, Jr.		Louis A. Pier	roni	
REET ADORESS			STREET ADDRESS		
225 Waterman Ave	enue		21 Mink Road		
225 Waterman Ave	STATE	ZIP COOE	άπγ	STATE	ZIP C005
E. Providence	RI	02914	Providence	ŔĬ	02908
	9 . N A	MES AND ADDE	<i> </i>	RECTORS	
RECTOR NAME	-	• •	DIRECTOR NAME		•
*No Board of	Directors	5	None STREET ADDRESS		
REET ADDRESS			STREET ADDRESS		
				·	
Y	STATE	ZIP COOE	att	STATE	ZIP CODE
ECTOR NAME		<u> </u>	DIRECTOR NAME	·	
			UNECTOR NAME		
None renaumess		<del> </del>	None		- · · <del>- · · · · · · · · · · · · · · · ·</del>
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,	UTHORIZED SHARES	nants adinon	TIEU AND 133VEU	ISSUED SHARES	
MUMBER OF SHARES	CLASS / SERIES	PAR VALUE	MUMBER OF SHARES	CLASS / SERIES	PAR VALUE
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2000 COM NO E	PAR VAL		100	Common	None
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	Th	is report must be SI	GNED IN INK by either the	20	
Preside			stant Secretary, Treasure		
· reside	J. 11, 4100 1 10010	zorni oddistary, Addi	•		
			Under penalty	perjury, I declare and a	ffirm that I have examin
			report, including all statements a	any accompanying sche ontained herein are true a	ruules and statements, a and correct.
1 1			/		_
File Date:	460		1-1/1-s		

#### 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:	000918		A	nnual Report	for the year:1995	
Name of Corporation:	AMERICA	N PAYROLI	SERVI(	E, LTD.		
Business entity organized of For foreign entity, address	under the laws of the State and telephone number of p	of: Rhode] rincipal office:	Island	Business Entity is (check one):  [X] Business Corporation (See RIGL Chapter 7-1.1)  [ ] Professional Service Corporation (See RIGL Chapter 7-5.1)		
			<del></del>	Brief statem	nent of the character of business conducted i	n Rhode Island:
Address and telephone of t Island (Provide street addre 225_Waterm	he principal office of busin ess - Not P.O. Box): an_Avenue_ dence,RI_029	ess entity in Rhoo	de	to_con	duct_a_payroll_service	
Phone: (401) 434:	-3800					
		THE NAM		OFFICERS	SARE:	
PRESIDENT		" 7	STREET ADDRE		CHYSTATE	Z.P CODE
D. Randy Hill VICE PRESIDENT		RFD #1,	BOX 33 STREET ADDRE		Chepachet, RI	02814 zz code
SECRETARY			STREET ADDRE	SS	CHY/STATE	Z.P CODE
<u>Francis E. Li</u> TREASURER	ttle, Jr.	225 Wat	erman A	venue ss	E. Providence, RI	02914 zap code
Louis A. Piero	oni	21 Mink		DIRECTOR	Providence, RI	02908
NAME		THE MAME	STREET ADDRE		CITYATATE	ZIP CODE
* No Boa	ard of Directo	ors	STREET ADDRE	ss	CITY/STATE	ZIP CODE
NAME			STREET ADDRE	55	CITY/STATE	ZIP CODE
NUMBER OF SHARES AU	THORIZED (Rider may be	attached)		NUMBER OF SI	HARES ISSUED AND OUTSTANDING (Rider	may be attached)
Number of Shares	Class / Series		1	Number of Sha	res Class / Series	
2,000	Common			100	Common	
Date <u>Ma</u>	arch 2, 19	95	By:	Mun	1/1/	
Form 31 1/95			TITLE OF OFFIC		President	
					VICE OF PROCESS:	
PLEASE NOTE: If the re	gistered office and/or regi-	stered agent indi-	ented below is	incorrect Ford	n 9 must be filed	

FRANCIS E. LITTLE, UR. 225 WATERMAN AVENUE EAST PROVIDENCE RI 02914 FILED

MAR 0 3 1995

The District of

1364 July 1968

Filing Fee \$50.00 Payable to: Secretary of State

#### PLEASE TYPE or PHINT

File Annually LLC, Sept. 1 - Nov. 1 CORP, Jun. 1 - March 1

#### 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

Corporate ID:	Annual Report for the year: = 1294
·	AMERICAN PAYROLL SERVICE, LTD
Name of Business Entity:	
Business entity organized under the laws of the State ofRhod.  Federal Taxpayer Identification Number:  For foreign entity, address and telephone number of principal office	Business Entity is (check one).  [X. Business Corporation (See RIGL Chapter 7-1.1)  [] Professional Service Corporation (See RIGL Chapter 7-5.1)  [] Limited Liability Company (See RIGL 7-16)
in the gradient y leads with the problem in the company of the	Name, title and mailing address of contact person to whom communications may be directed.
	Francis E. Little, Jr.  225 Waterman Avenue, P.O. Box 14198
Phone ( )	E. Providence, RI 02914-0198
Address and telephone of the principal office of business entity in Rh Island (Provide street address - Not P.O. Box):	Brief statement of the character of business conducted in Rhode Island.
225 Waterman Avenue	to conduct a payroll service
East Providence, RI 02914-3524	
<u></u>	Date of Organization. March 25, 1982
Phone. (401 ) 434-3800	Date of Qualification to do business in Rhode Island (if foreign entity):
THE NA	MES OF THE OFFICERS ARE:
☐ CHIPP EXSCUTIVE OFFICER OR	STREET ADDRESS CTYSTATE ZIPCOD
D. Randy Hill RFD #1,	Box 331-A Chepachet, RI 02814 STREET ADDRESS CHYSTATE 2IPCOD
Francis E. Little, Jr. 225 W	Raterman Avenue E. Providence, RI 02914-35
Francis E. Little, Jr. 225 W Cool Hoad Co. Office on Francisco Co. Louis A. Pieroni 21 Mi THE NAM	Raterman Avenue E. Providence, RI 02914-35; Ink Road Providence, RI 02908  MES OF THE DIRECTORS ARE:
Francis E. Little, Jr. 225 W Cool Hoad Co. Office on Fither Surface Control  Louis A. Pieroni 21 Mi THE NAM	Raterman Avenue E. Providence, RI 02914-35; STREET ADDRESS  OF THE DIRECTORS ARE:  STREET ADDRESS  CITYSTATE  CITYSTATE  CITYSTATE  CITYSTATE  CITYSTATE  CITYSTATE  CITYSTATE  CITYSTATE  CITYSTATE
Francis E. Little, Jr. 225 W  Charles Hawkita Green R. Terauser Consort  Louis A. Pieroni 21 Mi  THE NAM  *NO BOARD OF DIRECTORS	Raterman Avenue E. Providence, RI 02914-35.  Onk Road Providence, RI 02908  MES OF THE DIRECTORS ARE:  STREET ADDRESS CITYATADE ZOPCOD  SCREET ADDRESS CITYATADE ZOPCOD
Francis E. Little, Jr., 225 W Chief HNANCIAL OFFICER ON \$1 TRIANCIER (CN. ON)  Louis A. Pieroni 21 Mi  THE NAM  *NO BOARD OF DIRECTORS  NAME  NAME	RATEFRANDRESS CITYATADE STREET ADDRESS CITYATA
Francis E. Little, Jr. 225 W  Chief HNANCIAL OFFICER ON A TRIANCER (CN. 00)  Louis A. Pieroni 21 Mi  THE NAM  NAME  *NO BOARD OF DIRECTORS	AVERTAGORISS  RESTADORISS  E. Providence, RI 02914—35.  CITYSTATE  CITYSTATE  CITYSTATE  CITYSTATE  CITYSTATE  ZIPCOD  STREET ADDRESS  CITYSTATE  ZIPCOD  STREET ADDRESS  CITYSTATE  ZIPCOD
Francis E. Little, Jr. 225 W  COMPTINAVIAL OFFICER ON A TRIANCER CONSTITUTE  Louis A. Pieroni 21 Mi  THE NAM  *NO BOARD OF DIRECTORS  NAME  NAME  NUMBER OF SHARES AUTHORIZED (If Applicable)	AVERTAGORISS  RESTADORISS  RESTADORISS  CITYATADE  STREET ADDRESS  CITYATADE  STREET ADDRESS  CITYATADE  NUMBER OF SHARES ISSUED AND OUTSTANDING (If Applicable)
Francis E. Little, Jr. 225 W  CHIEF INANCIAL OFFICER ON A TRIANCER ICONO ON THE NAME  Louis A. Pieroni 21 Mi  THE NAM  *NO BOARD OF DIRECTORS  NAME  NUMBER OF SHARES AUTHORIZED (If Applicable)  NUMBER 2,000	RATE MADRIES E. Providence, RI 02914-352 STREET ADDRESS CITYATAD. ZECOD  STREET ADDRESS CITYATAD. ZECOD  STREET ADDRESS CITYATAD. ZECOD  NUMBER OF SHARES ISSUED AND OUTSTANDING (If Applicable)  NUMBER 100
Francis E. Little, Jr. 225 W  CHARLEST OF A PIETONI 21 Mi  THE NAM  *NO BOARD OF DIRECTORS  NAME  NAME  NUMBER OF SHARES AUTHORIZED (If Applicable)  NUMBER 2,000  CLASS Common	RATE MADRIES COMMON  STREET ADDRESS  CITYATAD  E. Providence, RI 02914-35 ZIPCOD  TOTALIB  CITYATAD  NUMBER OF SHARES ISSUED AND OUTSTANDING (If Applicable)  NUMBER 100  CLASS COMMON
Francis E. Little, Jr. 225 W  CHARLES OF A PIETONI 21 Mi  THE NAM  *NO BOARD OF DIRECTORS  NAME  *NO BOARD OF DIRECTORS  NAME  NUMBER OF SHARES AUTHORIZED (If Applicable)  NUMBER 2,000  CLASS Common  SERIES  PAR VALUE OR NO par value	RATES ADDRESS COMMON  STREET ADDRESS COMMON  NUMBER OF SHARES ISSUED AND OUTSTANDING (If Applicable)  NUMBER 100  CLASS Common  SERIES  PAR VALUE OR NO par value
Louis A. Pieroni 21 Mi THE NAM  *NO BOARD OF DIRECTORS  NAME  *NO BOARD OF DIRECTORS  NUMBER OF SHARES AUTHORIZED (If Applicable)  NUMBER 2,000  CLASS Common  SERIES  PAR VALUE OR NO par value WITHOUT PAR	RATES COMMON  STREET ADDRESS  CITYATAD  STREET ADDRESS  CITYATAD  CITYATAD  CITYATAD  CITYATAD  CITYATAD  CITYATAD  NUMBER OF SHARES ISSUED AND OUTSTANDING (If Applicable)  NUMBER  CITASS  COMMON  SERIES  PAR VALUE OR NO par value
Francis E. Little, Jr. 225 W  CHARLES A. Pieroni 21 Mi  THE NAM  *NO BOARD OF DIRECTORS  NAME  *NO BOARD OF DIRECTORS  NAME  NUMBER OF SHARES AUTHORIZED (If Applicable)  NUMBER 2,000  CLASS Common  SERIES  PAR VALUE OR No par value WITHOUT PAR	RATES ADDRESS CITYATAR DIRECTORS ARE:  STREET ADDRESS CITYATAR DIRECTORS ARE:  STREET ADDRESS CITYATAR DIVIDENCE DIRECTORS ARE:  STREET ADDRESS CITYATAR DIVIDENCE DIRECTORS ARE:  NUMBER OF SHARES ISSUED AND OUTSTANDING (If Applicable)  NUMBER 100  CLASS Common  SERIES  PAR VALUE OR No par value  WITHOUT PAR
Francis E. Little, Jr. 225 W  CHARLES A. Pieroni 21 Mi  THE NAM  *NO BOARD OF DIRECTORS  NAME  *NO BOARD OF DIRECTORS  NAME  NUMBER OF SHARES AUTHORIZED (If Applicable)  NUMBER 2,000  CLASS Common  SERIES  PAR VALUE OR No par value WITHOUT PAR	RATE MADDRESS  RATE ADDRESS  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS  CITYSTATE

FRANCIS E. LITTLE, JR 225 HATERMAN AVENUE EAST PROVIDENCE RI 02914

2079 FC\_

DKB - 6712

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

# State of Rhode Island and Frovidence Plantations CORPORATIONS DIVISION 100 NORTH MAIN STREET PROVIDENCE, RHODE ISLAND 02903

Corporate ID	0000518		Annual Report f	or the year	993	
FIRST:	The name of the corpora	ution is	AMERICAN PAYE			
SECOND	: It is incorporated under	er the laws of	Rhode Island		•••••••••••	
Third:	Character of business, b	riefly stated, is.	to conduct a payr	oll service	<u>}</u>	·••••••
Fourth	: If foreign corporation,	, address of its p	principal office			
			5 Waterman Avenue.			
' Ѕіхтн:	Names and addresses of	its directors and		(Attauding number, street, zip	ach rider if i code)	necessary)
*.N.o	Board of Director	r.s Director			•••••	
, , , ,		Director		••••••	•1••••••	••••••
		Director		····- <u>-</u>	•••••	
D. Randy	Hill	President	RFD #1, Box 331 Chepachet, RI 0		••••••	
		Vice Presid		,	*******	
Francis	E. Little Jr.	Secretary	225 Waterman Av East Providence 21 Mink Road			
Louis A.	Pieroni	Treasurer	Providence, RI	02908	*1************	
Seventh				or sta	ar Value atement that s are without	
No. of Sh			Series	·	ar value	
2,00	O Cor	mmon	ار نسوا ایم باز	withou withou	ıt par	value
Еіднтн:	Number of Shares issue	ed:		or sta	ar Value ntement that	
No of Sha	ares Cla	188	Series Series		s are without or value	
100	Cor	mmon		withou	t par	value
Dated			AMERICAN PAYROLL (Name of Corporation)  By President	SERWICE, LT	. d'	
{ <b>R</b> e	eport must be signed by an off	icer)	i ilië			*******

Form 31 1/85

# State of Rhode Island and Providence Plantations CORPORATIONS DIVISION 100 NORTH MAIN STREET PROVIDENCE, RHODE ISLAND 02903

Corporate ID	0000918	Annual Report for th	ne year1992
First: The name	of the corporation is	AMERICAN PAYR	OLL SERVICE, LID
Second: It is inco	orporated under the laws of	Rhode Island	
THIRD: Character	of business, briefly stated, is	toconductapayroll	Lservice
FOURTH: If foreig	n corporation, address of its pr	incipal office	
	ddress in Rhode Island 22	25 Waterman Avenue, nd 02914	P.O. Box 14198,
SIXTH: Names and	d addresses of its directors and		(Attach rider if necessary)
*No Board of D	irectors Director		
	Director		
	Director	DED #1 Day 221 x	
D. Randy Hill	President	RFD #1, Box 331-A Checpachet, RI 02	
	Vice Preside	nt	·····
Francis E. Lit	ttle, Jr. Secretary	225 Waterman Avenu East Providence, R	ie, P.O. Box 14198 II 02914
Louis A. Piero	oni Treasurer	21 Mink Road Providence, RI 029	08
Seventh: Numbe	er of Shares authorized:		Par Value
No. of Shares	Class	P°A°I D	or statement that shares are without par value
2,000	Common	JAN 3 1 1992	without par value
Eighth: Number	of Shares issued:	SEC'Y OF STATE	Par Value or statement that
No. of Shares	Class	Series	shares are without par value
100	Common		without par value
	B	AMERICAN PAYROLL SER  Name of Conforation)  y  Secretary	VICE, LTD.
(Report must be	e signed by an officer) T	itle	

# State of Rhode Island and Providence Plantations CORPORATIONS DIVISION 100 NORTH MAIN STREET PROVIDENCE, RHODE ISLAND 02903

Corporate ID	0000918		Annual Report for the	year 1991
First: T	he name of the corporation	n is	A NERICAN PAYROLL	
Second:	It is incorporated under the	he laws of	Rhode Island	
THIRD: (	Character of business, brief	ly stated, is	to conduct a payrol	lservice
Fourth:	If foreign corporation, ad	dress of its pr	incipal office	•••••••••••••••••••••••••••••••••••••••
Fігтн: В	usingss address in Rhode I	sland225		_ Box 14198,
	EastProvidencel	RI02914		
Sixth: N	lames and addresses of its	directors and	officers: Address (including num	(Attach rider if necessary) iber, street, zip code)
*NoBo	ard_of_Directors	Director		······
,		Director		
		Director		
D. Ra	ndy Hill	President	RFD #1, Box 331-A Chepachet, RI 02814	
	cis E. Little, Jr.		225 Waterman Avenue East Providence, RI 21 Mink Road	, P.O. Box 14198
Louis	s A. Pieroni	Treasurer	Providence, RI 0290	8
SEVENTH:	Number of Shares autho	rized:		Par Value or statement that
No. of Share	s Class		Series	shares are without par value
2,000	) Commo	n	PAID HAR 2 2 1991	without par value
Еіднтн:	Number of Shares issued:		SEC'Y OF STATE	Par Value or statement that
No. of Share	s Class		Series	shares are without par value
100	Commo	n		without par value
Dated	March 19		AMERICAN PAYROLL SER	VICE 1910.
		(: <b>B</b>	Name of Corporation)  y MMM	119
(Repo	ort must be signed by an officer	) T	itle Secretary	

Form 31 1/85

## State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION 100 NORTH MAIN STREET PROVIDENCE, RHODE ISLAND 02903

Corporate II	000091	8		year 1990
First:	The name of th	e corporation is	AMERICAN PAYROLL SER	VICE, LTD.
Second	o: It is incorpor	ated under the laws of	Rhode Island	
THIRD:	Character of b	usiness, briefly stated, is	to conduct a payroll	service
Fourti	н: If foreign cor	poration, address of its pr	incipal office	
<b>Г</b> І <b>гт</b> н:	Business addres		Waterman Avenue, P.O.	Box 4198,
••••		East Provi	dence, RI 02914	
<b>S</b> іхтн:	Names and add	dresses of its directors and	officers: Address (including num	(Attach rider if necessary) nber, street, zip code)
*No Bo	oard of Dire	ectors Director		
••••••		Director		
	•••••	Director	RFD #1, Box 331-A	
D. Randy H	li 1 ]		Chepachet, RI 02814	
***************************************		Vice Preside	nt	0.00
Francis E.	Little, Jr	Secretary	225 Waterman Ave., East Providence, RI	02914
Louis A. F	Pieroni	Treasurer	21 Mink Road Providence RI 02908	
Sevent	н: Number of S	Shares authorized:		Par Value or statement that
No. of S	hares	Class	Series	shares are without par value
2,0	000	Common	PAID	without par value
Еіснтн	: Number of Si	hares issued:	MAR 3 U 1990	Par Value or statement that
No. of S	ihares	Class	SECH! OF STATE	shares are without par value
100	)	Common		without par value
Dated	Februar	ny20 <b>19</b> 90	AMERICAN PAYROLL SERV	ICE. 10)
		В	y Haus 29	
<b>(</b> )	Report must be signe	ed by an officer)	Tile Secretary	

## State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION

Title President

0000	PROVIDENCE, R	HODE ISLAND 02903	1989
Corporate ID	/210 	Annual Report for th	ne year
FIRST: The name of	f the corporation is	AMERICAN PAYROLL :	BERVICE, LTD.
Second: It is incorp	porated under the laws of	Rhode Island	
THIRD: Character o	f business, briefly stated, is	to conduct a payro	ll service
FOURTH: If foreign	corporation, address of its p	rincipal office	
FIFTH: Business add	lress in Rhode Island22	5. Waterman Avenue, P	.0. Box 4198.
East Providen	.ce.,RhodeIslandO	2.914	
SIXTH: Names and a	addresses of its directors and		(Attach rider if necessary)
**NoBoard.of	Dinectons Director		••••••
	Director		
	Director	DCD # D 220 A	
D. Randy Hill	President	Chepachet, RI 0281	4
	Vice Preside	ent	
Francis E. Little,		225 Waterman Avenu	e, P.O. Box 4198 I 02914
Louis A. Pieroni	Treasurer	21 Mink Road, Prov	idence, RI 02908
SEVENTH: Number	of Shares authorized:	PAID	Par Value or statement that shares are without
No. of Shares	Class	SFEB 2.1 10	par value
2,000	Common	PAID  SECY OF STATE	without par value
Еіднтн: Number of	f Shares issued:	TAIR	Par Value
No. of Shares	Class	Series	or statement that shares are without par value
100	Common		without par value
Dated Febru	uaryl., 1989	AMERICAN PAYROLL (Name of Corporation)	SERVICE, LTD.

(Report must be signed by an officer)

## State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION 270 WESTMINSTER MALL PROVIDENCE. RHODE ISLAND 02903

Corporate ID	718		Annual Report for the	he year	
	he name of the corporation is				
Second:	It is incorporated under the l	aws of	Sne	de Island	*********
	If foreign corporation, address				
Fіггн: В	usiness address in Rhode Islan	nd225 W	aterman Avenue	, East Providence	<b>2.,</b>
Sixth: N	James and addresses of its dire	ectors and officers		(Attach rider if neconumber, street, zip code)	essary)
D. Randy	l of Directors Di Di Hill Pr	irector irector RF.D.	#1.,Box330-A	, Chapachet., RI (	0.2814
	E. Little, Jr. Se			, E.Prov., RI 029	
Louis A.	Pieroni Tr	easurer 21	Mink Rd., Prov	idence, RI 02908	••••
SEVENTH: No. of Share	Number of Shares authorize	ed:	Series	Par Value or statement that shares are without par value	
2,000 EIGHTH:	Common  Number of Shares issued:  Class	PAID MAR 2 0 19	988 Series	ithout par value  Par Value  or statement that  shares are without  par value	17
100	Common	SEC'Y OF S		ithout par value	2
Dated	February 15, 1988	(Name of Co	ERICAN PAYROLL	SERVICE, LTD.	
(Rep.	ort must be signed by an officer)	TitleP.	resident		•••••

# State of Rhode Island and Providence Plantations CORPORATIONS DIVISION 270 WESTMINSTER MALL PROVIDENCE, RHODE ISLAND 02903

Corporate ID 918		Annual Report for the	year 1987
FIRST: The name o	f the corporation isAM	RICAN PAYROLL SERVICE, LID	<b>4</b>
SECOND: It is incor	porated under the laws of	Rhode Island	
THIRD: Character of	of business, briefly stated, is	to conduct a payroll	service
FOURTH: If foreign	corporation, address of its	principal office	
		Waterman Avenue, East	Providence,
Rnode	Island 02914		•••••••••••••••••••••••••••••••••••••••
SIXTH: Names and	addresses of its directors an	d officers: Address (including num	(Attach rider if necessary) ther, street, rip code)
	Director		•••••••••••••••••••••••••••••••••••••••
	Director		
	Director		
D. Randy Hill	President	RFD #1, Box 330-A, C	Chepachet, Ri 02814
	Vice Presic	lent	
Francis E. Littl	e, Jr. Secretary	225 Waterman Ave., E	. Prov., RI 02914
Louis A. Pieroni	Treasurer	21 Mink Rd., Provide	nce, RI 02908
Seventh: Number	of Shares authorized:		Par Value
No. of Shares	Class	Series	or statement that shares are without
2,000	Common		par value thout par value
Eібнтн: Number o	f Shares issued:	PAID	Par Value
No of Shares	Class		or statement that shares are without par valuella.
2,000	Common	<sup>Sele</sup> 26 1987 Sec'y. Of State <sup>wi</sup>	thout par yalu
Dated Janua	ry <i>30</i> 1987	AMERICAN PAYROLL S (Name of Corporation)	ERVICE, LTD.
(Report must be s	igned by an officer)	Title President	

## State of Rhode Island and Frovidence Plantations CORPORATIONS DIVISION 270 WESTMINSTER MALL PROVIDENCE. RHODE ISLAND 02903

Corporate ID918		Annual Report for the year 1986		
First: The name	of the corporation isAM	ERICAN PAYROLL SEF	NVICE, LTD.	
SECOND: It is inco	orporated under the laws of		sland	
THIRD: Character	of business, briefly stated, is	to conduct a	payroll service	
FOURTH: If foreig	n corporation, address of its	principal office		
	ddress in Rhode Island27			
Name	d addresses of its directors at	Addr	ess (including number, street, zip code	
	Director			
	Director		•••••••••••••••••••••••••••••••••••••••	
	Director		330-A, Chepachet	
•	President Via Bresident			
	Vice Presi tle, Jr. Secretary			
Louis A. Piero	•			
	er of Shares authorized:	e - annametra	Par V	
No. of Shares	Class	Series	JUN 2 0 1986 shares are par v	without
2,000	Common	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	without par v	alue
Eighth: Number	of Shares issued:	UPR OF MOS	Par V or statem	
No. of Shares	Class	SECY. OF STATE	shares are par v	without
100	Common		without par	value
Dated Marc	h28,1986	AMERICAN PAY (Name of Corporation)  By Anna	ROLL SERVICE, LT	D.
(Report must be	signed by an officer)	Title Fresiden	L	

## State of Rhode Island and Providence Plantations CORPORATIONS DIVISION 270 WESTMINSTER MALL PROVIDENCE, RHODE ISLAND 02903

Corporate ID918	•••••••••••••••••••••••••••••••••••••••	Annual Report for	or the year 1985
First: The name	e of the corporation isAMERIC	CAN PAYROLL SERVICE.	LTD.
SECOND: It is inc			
THIRD: Characte			roll service
FOURTH: If forei	gn corporation, address of its pr	incipal office	
FIFTH: Business a			ast Providence,
Rhode Isla	and 02914		•••••••••••••••••••••••••••••••••••••••
SIXTH: Names at Name	nd addresses of its directors and		(Attach rider if necessary) ding number, street, zip code)
	Director		
	Director		
	Director		
DRandyHill	President	.RFD#1,Box330	-A, Chepachet, RIO2814
	Vice Presider	nt	
Francis E. Littl	Le, Jr. Secretary	.225WatermanAv	e., E. Prov, RI02914
Louis A. Pieroni	Treasurer	.21MinkRoad.,P	rovidence, RI 02908
SEVENTH: Numb	er of Shares authorized:		Par Value or statement that
No. of Shares	Class	Series	shares are without par value
2,000	Common		No Par Value
EіGнтн: Numbei	r of Shares issued:		Par Value or statement that
No. of Shares	Class	Series	shares are without par value
100	Common		No Par Value
Dated. March18 RECEL	19 .85 VE. APR 1985	AMERICAN PAYROLL  Same of Corporation)	SERVICE, LTD.
(Report must b	~ ~ ~	ide President	

Filing fee: \$15.00

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

## State of Rhode Island and Providence Plantations OFFICE OF THE SECRETARY OF STATE

Annual Report for the year 1984

FIRST: The name of the corporation is AMERICAN PAYROLL SERVICE, LTD.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island

225 Waterman Avenue, East Providence, Rhode Island 02914

SIXTH: Names and addresses of its directors and officers:

(Addresses must include street and number, if any)

Name

Office

Address

Director

Director

Director

D. Randy Hill

President

RFD #1, Box 300-A, Chepachet, RI 0281

Vice President

Francis E. Little, Jr. S

Secretary

225 Waterman Ave., East Prov., RI 029

Louis A. Pieroni

Treasurer

21 Mink Road, Providence, RI 02908

(If additional space is needed, attach rider)

No. of Shares

SEVENTH: Number of Shares authorized:

Par Value or statement that shares are without par value

2,000

Class Common

Series

No Par Value

EIGHTH: Number of Shares issued:

\_ .

Par Value or statement that shares are without par value

No. of Shares

Common

Class

Series

No Par Value

Dated:

February 28 19 84

84

3

AMERICAN PAYROLL SERVICE, LTD.

1984 1984

F/2) Kandy th

(Report must be signed by an officer)

If the corporation has changed its registered agent, Form #9 must be filed. Please contact Corporation Division for information. 277-3040

Filing fee: \$15.00

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

## State of Rhode Island and Providence Plantations office of the secretary of state

			Annual Report fo	or the year 🧠	1983	
First:	The name of th	ne corporation	ı is			
· .	American Pa	yroll Serv	ice, Ltd.			
SECOND:	It is incorpor	rated under t	he laws of Rho	ode Island		
Third:	Character of b	usiness, briefl a payroll	•			
Fourth:	If foreign c	orporation, a	ddress of its princ	cipal office	· · · · · · · · · · · · · · · · · · ·	
Bus	iness addres	s: 1414 At	Island (blank rep wood Ave., Joh er Pollock & S	nnston, RI Sheehan At	mailed to this th: Peter L. ennedy, Esq.	
SIXTH:	Names and ad	ldresses of its	s directors and off	ficers:		
	(Addresses mu	ist include street	and number, if any)			
>	lame	Office		Address		
		Director				
		Director				
		Director				
Richard E.	Armstrong	President	1414 Atwood	od Ave., Jo	ohnston, RI	
		Vice Presid	dent	4 4		
		Secretary Asst. Se Treasurer			Tower, Prov., phnston, RI	RI
SEVENTH	: Number of	Shares author	rized:		ar Value atement that	
No. of Sha	res	Class	Series	share	s are without par value	
2000		Common		No	par value	
EIGHTH;		Shares issued	]: Series	or st share	ar Value atement that is are without our value	
100		Common	2	No	par value	
Dated:	1/28	19 83	American P.  (Name of Corporation	<b>.</b> .	vice, Ltd.	
	FEB 11	₹ 9 <b>83</b>	Title of rende	t be signed by	an officer)	

If the corporation has changed its registered office and/or its registered agent, Form #9 must be filed. Please contact Corporation Division for information. 277-3040