



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 02903-1333
401.222.3041

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. 69924		2. Name of Corporation New England School Services, Inc.			
3. Street Address Principal Business Office 98 Hicks Avenue		City Medford	State Massachusetts	Zip 02155	
4. Business Phone No. 617-776-4700		5. State of Incorporation MASSACHUSETTS			6. SIC Code 414
7. Brief Description of the Character of Business Conducted in Rhode Island SALES AND OR INSTALLATION OF BUILDING PRODUCTS.					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Wayne R. Hingston			Vice President Name None		
Street Address 288 Border Road			Street Address		
City Concord	State MA	Zip 01742	City	State	Zip
Secretary Name None			Treasurer Name None		
Street Address			Street Address		
City	State	Zip	City	State	Zip
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			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <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
100 COMM NO PAR VALUE			100	Comm	No Par

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



File Date	2-2-05
Check No.	16288
By:	W
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

Date

Wayne R. Hingston
Print or Type Name of Officer

President

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 02903-1333
401.222.304

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. 69924		2. Name of Corporation New England School Services, Inc.			
3. Street Address Principal Business Office 98 Hicks Avenue			City Medford	State Massachusetts	Zip 02155
4. Business Phone No. 617-776-4700		5. State of Incorporation MASSACHUSETTS			6. SIC Code 414
7. Brief Description of the Character of Business Conducted in Rhode Island SALES AND OR INSTALLATION OF BUILDING PRODUCTS.					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Wayne R. Hingston			Vice President Name None.		
Street Address 288 Border Road			Street Address		
City Concord	State MA	Zip 01742	City	State	Zip
Secretary Name			Treasurer Name None		
Street Address			Street Address		
City	State	Zip	City	State	Zip
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		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
AUTHORIZED SHARES					
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
100 COMM NO PAR VALUE					
100	Common	No Par	100	Common	No Par
11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
ISSUED SHARES					
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value

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



* 6 9 9 2 4 *

File Date 1-26-04
Check No. 14712
By: [Signature]
FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer

Wayne R. Hingston

Print or Type Name of Officer

President

Title of Officer

Date

1-12-0

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.

69924

2. Name of Corporation

New England School Services, Inc.

3. Street Address Principal Business Office

98 Hicks Avenue

City

Medford

State

MA

Zip

02155

4. Business Phone No.

617-776-4700

5. State of Incorporation

MASSACHUSETTS

6. SIC Code

414

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

Sales, Installation of Doors, Frames, Hardware and Bathroom Partitions

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

President Name

Wayne R. Hingston

Street Address

288 Border Road

City

Concord

State

MA

Zip

01742

Secretary Name

Street Address

City

State

Zip

Vice President Name

Wayne R. Hingston

Street Address

City

State

Zip

Treasurer Name

None

Street Address

City

State

Zip

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

Director Name

Street Address

City

State

Zip

Director Name

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

100 COMM NO PAR VALUE

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

ISSUED SHARES

Number of Shares

Class/Series

Par Value

100

Common

No Par

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



* 6 9 9 2 4 *

File Date: 1-30-03

Check No.: 13226

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.

Signature of Officer

Wayne R. Hingston

Print or Type Name of Officer

President

Title of Officer

Date 1/24/03



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
401-222-3046



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.

69924

2. Name of Corporation

New England School Services, Inc.

3. Street Address Principal Business Office

98 Hicks Avenue

City

Medford

State

MA

Zip

02155

4. Business Phone No.

617-776-4700

5. State of Incorporation

MASSACHUSETTS

6. SIC Code

414

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

Sales, Installation of Doors, Frames, Hardware and Bathroom Partitions

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

President Name

Wayne R. Hingston

Street Address

288 Border Road

City

Concord

State

MA

Zip

01742

Vice President Name

Wayne R. Hingston

Street Address

City

State

Zip

Secretary Name

None

Street Address

Treasurer Name

None

Street Address

City

State

Zip

City

State

Zip

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

Director Name

Director Name

Street Address

Street Address

City

State

Zip

City

State

Zip

Director Name

Director Name

Street Address

Street Address

City

State

Zip

City

State

Zip

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

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

100 COMM NO PAR VALUE

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

ISSUED SHARES

Number of Shares

Class/Series

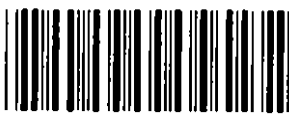
Par Value

100

Common

No Par

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



* 6 9 9 2 4 *

File Date:

2-21-02

Check No.:

11812

By:

Wayne R. Hingston

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

Date

Wayne R. Hingston

Print or Type Name of Officer

President

Title of Officer

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001

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

(FORM MUST BE TYPED IN BLACK)



1. Corporate ID No. 69924		2. Name of Corporation New England School Services, Inc.			
3. Street Address Principal Business Office 98 Hicks Avenue			City Medford	State MA	Zip 02155
4. Business Phone No. 671-776-4700		5. State of Incorporation Massachusetts			6. SIC Code 0414
7. Brief Description of the Character of Business Conducted in Rhode Island Sales, Installation of Doors, Frames, Hardware and Bathroom Partitions					
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Wayne R. Hingston			Vice President Name Wayne R. Hingston		
Street Address 288 Border Road			Street Address		
City Concord	State MA	Zip 01742	City	State	Zip
Secretary Name None.			Treasurer Name None.		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name None.			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT) <input type="checkbox"/>			11. SHARES ISSUED (*X* BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares 100	Class/Series Common	Par Value No Par	Number of Shares 100	Class/Series Common	Par Value No Par

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

FILE

File Date: **AUG 01 2001**

Check No.: **By 100 10960**

By: _____

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer: **Wayne R. Hingston** Date: **7/27/01**

Print or Type Name of Officer: **Wayne R. Hingston**

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 02903-13
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.

69924

2. Name of Corporation

New England School Services, Inc. **TO DO BUSINESS UNDER FICTITIOUS N

3. Street Address Principal Business Office

98 Hicks Avenue

City

Medford

State

MA

Zip

02155

4. Business Phone No.

(617) 776-4700

5. State of Incorporation

MASSACHUSETTS

6. SIC Code

414

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

Sales, Installation of Doors, Frames and Hardware, Bathroom Partitions

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

President Name

Wayne R. Hingston

Vice President Name

Wayne R. Hingston

Street Address

Street Address

288 Border Road

City

State

Zip

Concord

MA

01742

City

State

Zip

Treasurer Name

Same as Above

Same as Above

Street Address

Street Address

City

State

Zip

City

State

Zip

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

Director Name

Same as Above

Director Name

Street Address

Street Address

City

State

Zip

City

State

Zip

Director Name

Director Name

Street Address

Street Address

City

State

Zip

City

State

Zip

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

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

100

Common

No Par

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

ISSUED SHARES

Number of Shares

Class/Series

Par Value

100

Common

No Par

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



* 6 9 9 2 4 *

PAID

File Date:

JAN 19 2000

Check No.:

SECY OF STATE

By:

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer

Wayne R. Hingston

Print or Type Name of Officer

President

Title of Officer

1/18/2000

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. 69924		2. Name of Corporation New England School Services, Inc. *TO DO BUSINESS UNDER FICTITIOUS NAME ONLY			
3. Street Address Principal Business Office 98 Hicks Avenue			City Medford	State Massachusetts	Zip 02155
4. Business Phone No. (617) 776-4700		5. State of Incorporation MASSACHUSETTS			6. SIC Code 414
7. Brief Description of the Character of Business Conducted in Rhode Island Sales, Installation of Doors, Frames, Hardware and Bathroom Partitions					
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Wayne R. Hingston			Vice President Name Wayne R. Hingston		
Street Address 288 Border Road			Street Address		
City Concord	State MA	Zip 01742	City	State	Zip
Secretary Name None			Treasurer Name None		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT) <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
1.00	Common	No. Par	1.00	Common	No. Par

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



* 6 9 9 2 4 *

File Date: **1-14-99**

Check No: **11165**

By: **AMP**

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.

Wayne R. Hingston 1/11/99
Signature of Officer Date
Wayne R. Hingston
Print or Type Name of Officer
President
Title of Officer

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. **69924** 2. Name of Corporation **New England School Services, Inc.** **TO DO BUSINESS UNDER FICTITIOUS NAME ONLY**
3. Street Address Principal Business Office **33 Mystic Avenue** **Somerville** **Massachusetts** **02145**
4. Business Phone No. **(617) 776-4700** 5. State of Incorporation **MASSACHUSETTS** 6. SIC Code **0414**
7. Brief Description of the Character of Business Conducted in Rhode Island **Sales, Installation of Doors, Frames, Hardware and Bathroom Partitions**

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

President Name	Vice President Name
Wayne R. Hingston	Wayne R. Hingston
Street Address	Street Address
288 Border Road	
City State Zip	City State Zip
Concord MA 01742	
Secretary Name	Treasurer Name
None	None
Street Address	Street Address
City State Zip	City State Zip

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

Director Name	Director Name
None.	
Street Address	Street Address
City State Zip	City State Zip
Director Name	Director Name
Street Address	Street Address
City State Zip	City State Zip

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

AUTHORIZED SHARES		
Number of Shares	Class/Series	Par Value
100	Common	No Par

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

ISSUED SHARES		
Number of Shares	Class/Series	Par Value
100	Common	No Par

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



File Date: **1/13/98**

Check No.: **10997**

By: **100**

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.

Wayne R. Hingston **1/12/98**
Signature of Officer Date
Wayne R. Hingston
Print or Type Name of Officer
President
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 02903-1331
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. **69924** 2. Name of Corporation **New England School Services, Inc.**TO DO BUSINESS UNDER FICTITIOUS NAME ON**

3. Street Address Principal Business Office **33 myptic Ave** City **Somerville** State **MA** Zip **02145**
4. Business Phone No. **617-776-4700** 5. State of Incorporation **MASSACHUSETTS** 6. SIC Code **0414**

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

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

President Name Wayne R. Kingston	Vice President Name same
Street Address 33 myptic Ave	Street Address same
City Somerville State MA Zip 02145	City same State MA Zip 02145
Secretary Name same	Treasurer Name same
Street Address same	Street Address same
City same State MA Zip 02145	City same State MA Zip 02145

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

Director Name None	Director Name None
Street Address None	Street Address None
City None State MA Zip 02145	City None State MA Zip 02145
Director Name None	Director Name None
Street Address None	Street Address None
City None State MA Zip 02145	City None State MA Zip 02145

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

AUTHORIZED SHARES			ISSUED SHARES <input checked="" type="checkbox"/>		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
100	Common	0	100	Common	0

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



File Date: **2-5-97**
Check No.: **10931**
By: **WPK**

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 **Wayne R. Kingston** Date **1-27-97**
Print or Type Name of Officer **Wayne R. Kingston**
Title of Officer **President**

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) 277-304

Filing Period: January 1-March 1

Filing Fee: \$50.00

PLEASE TYPE OR PRINT IN BLACK INK.

1. CORPORATE ID NO. 69924		2. NAME OF CORPORATION New England School Services, Inc.**TO DO BUSINESS	
3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE 33 Mystic Avenue		CITY Somerville	STATE Massachusetts
4. BUSINESS PHONE NO. (617) 776-4700		5. STATE OF INCORPORATION MASSACHUSETTS	6. SIC CODE 0414

7. BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE ISLAND

Sales, Installation of Doors, Frames and Hardware, Bathroom Partitions

8. NAMES AND ADDRESSES OF THE OFFICERS

PRESIDENT NAME Wayne R. Hingston			VICE PRESIDENT NAME Wayne R. Hingston		
STREET ADDRESS 288 Border Road			STREET ADDRESS		
CITY Concord	STATE MA	ZIP CODE 01742	CITY	STATE	ZIP CODE
SECRETARY NAME Same as Above			TREASURER NAME Same as Above		
STREET ADDRESS			STREET ADDRESS		
CITY	STATE	ZIP CODE	CITY	STATE	ZIP CODE

9. NAMES AND ADDRESSES OF THE DIRECTORS

DIRECTOR NAME Same as Above			DIRECTOR NAME		
STREET ADDRESS			STREET ADDRESS		
CITY	STATE	ZIP CODE	CITY	STATE	ZIP CODE
DIRECTOR NAME			DIRECTOR NAME		
STREET ADDRESS			STREET ADDRESS		
CITY	STATE	ZIP CODE	CITY	STATE	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
100	Common	No Par	100	Common	No Par

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:

2/5/96

Check No:

10788

By:

@LP

For Secretary of State Use Only

Signature of Officer

Wayne R. Hingston

Print or Type Name of Officer

President

Title of Officer

1/26/96

Date

DETACH BOTTOM BEFORE RETURNING

FORM 31 12/95

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
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: 69924 Annual Report for the year: 1995

Name of Corporation: New England School Services, Inc.

Business entity organized under the laws of the State of: Massachusetts Business Entity is (check one):

For foreign entity, address and telephone number of principal office: [X] Business Corporation (See RIGL Chapter 7-1.1)

33 Mystic Avenue [] Professional Service Corporation (See RIGL Chapter 7-5.1)

Somerville, Massachusetts 02145

Phone: (617) 776-4700

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

Phone: ()

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

New England Schools Services, Inc. is in the business of furnishing and installing doors, frames, hardware and partitions.

THE NAMES OF THE OFFICERS ARE:

PRESIDENT	STREET ADDRESS	CITY/STATE	ZIP CODE
Wayne R. Hingston	33 Mystic Avenue	Somerville, MA	02145

VICE PRESIDENT	STREET ADDRESS	CITY/STATE	ZIP CODE
N/A			

SECRETARY	STREET ADDRESS	CITY/STATE	ZIP CODE
Wayne R. Hingston	As Above		

TREASURER	STREET ADDRESS	CITY/STATE	ZIP CODE
Wayne R. Hingston	As Above.		

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
N/A			

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE

NUMBER OF SHARES AUTHORIZED (Rider may be attached)		NUMBER OF SHARES ISSUED AND OUTSTANDING (Rider may be attached)	
Number of Shares	Class / Series	Number of Shares	Class / Series
100	Common	100	Common

Date February 27, 1995

By: Wayne R. Hingston

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.

CT Corporation System
123 Dyer Street
Providence, Rhode Island

FILED

FEB 28 1995

By: 10672

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903Corporate ID 0059924 Annual Report for the year 1993FIRST: The name of the corporation is New England School Services, Inc. #STD 00SECOND: It is incorporated under the laws of MassachusettsTHIRD: Character of business, briefly stated, is Distribution & installations
of doors & hardwareFOURTH: If foreign corporation, address of its principal office 33 Mystic Ave
Somerville, Mass. 02145FIFTH: Business address in Rhode Island Agent - C.T. Corp.
123 Dyer St. Providence, Mass.

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

Name

Office

Address (including number, street, zip code)

Wayne R. Hington	Director	288 Border Rd Concord, Mass 01742
"	Director	
"	Director	
"	President	
"	Vice President	
"	Secretary	
"	Treasurer	

SEVENTH: Number of Shares authorized:

No. of Shares

Class

Series

Par Value
or statement that
shares are without
par value

100

NPV

Common

NPV

EIGHTH: Number of Shares issued:

No. of Shares

Class

Series

Par Value
or statement that
shares are without
par value

100

NPV

Common

NPV

Dated 1-25 1993New England School Services, Inc
(Name of Corporation)By Wayne R. HingtonTitle President

(Report must be signed by an officer)