



**State of Rhode Island and Providence Plantations
Office of the Secretary of State**

Fee: \$50.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Limited Liability Company
Annual Report**

Filing Period: September 1 - November 1

In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2019

1. ID No. 001672431

2. Exact Name of the Limited Liability Company American Electrical Testing Co., LLC

3. State of Formation

State: MA

ARTICLE III

Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes [here](#). More information on [NAICS](#) can be found online.

237130

4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island

ELECTRICAL TESTING

5. Principal Office Address

No. and Street: 155 FEDERAL STREET

SUITE 700

City or Town: BOSTON

State: MA

Zip: 02110

Country: USA

6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:

Contact Name: Contact Title:

No. and Street: 708 BLAIR MILL ROAD

City or Town: WILLOW GROVE

State: PA

Zip: 19090

Country: USA

**7. Name and Address of Each Manager of the Limited Liability Company, if Applicable.
DO NOT LIST MEMBERS**

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
MANAGER	SCOTT M ASPLUNDH	708 BLAIR MILL ROAD WILLOW GROVE, PA 19090 USA

MANAGER	CHARLES K BLIZARD JR	708 BLAIR MILL ROAD WILLOW GROVE, PA 19090 USA
MANAGER	RONALD S SIMPSON	708 BLAIR MILL ROAD WILLOW GROVE, PA 19090 USA
MANAGER	BRIAN R BAUER	708 BLAIR MILL ROAD WILLOW GROVE, PA 19090 USA

**8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 642 - R.I.G.L. 7-16-11**

CT CORPORATION SYSTEM 450 VETERANS MEMORIAL PARKWAY, SUITE 7A EAST
PROVIDENCE , RI 02914

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 21 Day of October, 2019 at 4:01:55 PM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By RONALD S SIMPSON
Signature of Authorized Person

Form No. 632
Revised 09/07

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