



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)

Form with sections: 1. Corporate ID No (62745), 2. Name of Corporation (G & S AUTOMOTIVE SERVICE AND MACHINE SHOP, INC.), 3. Street Address (105 Broadway (Rear)), 4. Business Phone No (401-846-0794), 5. State of Incorporation (RHODE ISLAND), 6. SIC Code (8953), 7. Brief Description of the Character of Business (AUTOMOTIVE REPAIR SHOP), 8. NAMES AND ADDRESSES OF THE OFFICERS (Kenneth A. Gaisford, Jason K. Gaisford), 9. NAMES AND ADDRESSES OF THE DIRECTORS (Kenneth A. Gaisford), 10. SHARES AUTHORIZED (2,000 COMM NO PAR VALUE), 11. SHARES ISSUED (100).

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.

Signature of Officer: Kenneth A. Gaisford, Date: 3/7/05

Kenneth A. Gaisford

Print or Type Name of Officer

President

Title of Officer

File Date, Check No., By: (signature), FOR SECRETARY OF STATE USE ONLY



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)

Form with sections for: 1. Corporate ID No. (62745), 2. Name of Corporation (G & S AUTOMOTIVE SERVICE AND MACHINE SHOP, INC.), 3. Street Address (105 Broadway), 4. Business Phone No. (401-846-0794), 5. State of Incorporation (RHODE ISLAND), 6. SIC Code (8953), 7. Brief Description of the Character of Business (AUTOMOTIVE REPAIR SHOP), 8. NAMES AND ADDRESSES OF THE OFFICERS (Kenneth A. Gaisford, Jason K. Gaisford), 9. NAMES AND ADDRESSES OF THE DIRECTORS (Kenneth A. Gaisford), 10. SHARES AUTHORIZED (2,000 COMM NO PAR VALUE), 11. SHARES ISSUED (100).

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



\* 6 2 7 4 5 \*

File Date: 3/1/04
Check No.: 8598
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: Kenneth A. Gaisford
Date: 2/27/04
Print or Type Name of Officer: Kenneth A. Gaisford
Title of Officer: President

**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. **62745** 2. Name of Corporation **G & S AUTOMOTIVE SERVICE AND MACHINE SHOP, INC.**  
3. Street Address Principal Business Office **105 Broadway (Rear)** City **Newport** State **RI** Zip **02840**  
4. Business Phone No. **(401) 846-0794** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **8953**  
7. Brief Description of the Character of Business Conducted in Rhode Island **Automotive Repair Shop**

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

President Name <b>Kenneth A. Gaisford</b> Street Address <b>80 Old County Road</b> City <b>Westport</b> State <b>RI</b> Zip <b>02840</b>	Vice President Name <b>Jason K. Gaisford</b> Street Address <b>80 Old County Road</b> City <b>Westport</b> State <b>RI</b> Zip <b>02840</b>
Secretary Name <b>Kenneth A. Gaisford</b> Street Address <b>Same as above</b> City <b>Westport</b> State <b>RI</b> Zip <b>02840</b>	Treasurer Name <b>Kenneth A. Gaisford</b> Street Address <b>Same as above</b> City <b>Westport</b> State <b>RI</b> Zip <b>02840</b>

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

Director Name <b>Kenneth A. Gaisford</b> Street Address <b>Same as above</b> City <b>Westport</b> State <b>RI</b> Zip <b>02840</b>	Director Name  Street Address  City <b>Westport</b> State <b>RI</b> Zip <b>02840</b>
Director Name  Street Address  City <b>Westport</b> State <b>RI</b> Zip <b>02840</b>	Director Name  Street Address  City <b>Westport</b> State <b>RI</b> Zip <b>02840</b>

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

AUTHORIZED SHARES	Class/Series	Par Value
2,000 COMM NO PAR VALUE		

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

ISSUED SHARES	Class/Series	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



\* 6 2 7 4 5 \*

File Date: 2.20.03  
Check No.: 7892  
By: UP

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.

Kenneth A. Gaisford 2/24/03  
Signature of Officer Date

Kenneth A. Gaisford  
Print or Type Name of Officer

President  
Title of Officer



**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. **62745** 2. Name of Corporation **G & S AUTOMOTIVE SERVICE AND MACHINE SHOP, INC.**  
3. Street Address Principal Business Office **105 Broadway (Rear)** City **Newport** State **RI** Zip **02840**  
4. Business Phone No. **(401) 846-0794** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **8953**

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

Automotive Repair Shop

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

President Name <b>Kenneth A. Gaisford</b>	Vice President Name <b>Jason K. Gaisford</b>
Street Address <b>80 Old County Road</b>	Street Address <b>15 Faulkner Street</b>
City <b>Westport</b> State <b>MA</b> Zip <b>02790</b>	City <b>Westport</b> State <b>MA</b> Zip <b>02790</b>
Secretary Name <b>Kenneth A. Gaisford</b>	Treasurer Name <b>Kenneth A. Gaisford</b>
Street Address <b>Same as above</b>	Street Address <b>Same as above</b>
City <b>Westport</b> State <b>MA</b> Zip <b>02790</b>	City <b>Westport</b> State <b>MA</b> Zip <b>02790</b>

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

Director Name <b>Kenneth A. Gaisford</b>	Director Name
Street Address <b>Same as above</b>	Street Address
City <b>Westport</b> State <b>MA</b> Zip <b>02790</b>	City <b>Westport</b> State <b>MA</b> Zip <b>02790</b>
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
	<b>2,000 COMM NO PAR VALUE</b>		

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

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

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



\* 6 2 7 4 5 \*

File Date: 2-28-02  
Check No.: 7269  
By: [Signature]

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] 2/26/02  
Signature of Officer Date

**Kenneth A. Gaisford**  
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. **62745** 2. Name of Corporation **G & S AUTOMOTIVE SERVICE AND MACHINE SHOP, INC.**  
3. Street Address Principal Business Office **105 Broadway (Rear)** City **Newport** State **RI** Zip **02840**  
4. Business Phone No. **(401) 846-0794** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **8953**  
7. Brief Description of the Character of Business Conducted in Rhode Island  
**Automotive Repair Shop**

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

President Name <b>Kenneth A. Gaisford</b>	Vice President Name <b>Jason K. Gaisford</b>
Street Address <b>80 Old County Road</b>	Street Address <b>15 Faulkner Street</b>
City State Zip <b>Westport MA 02790</b>	City State Zip <b>Westport MA 02790</b>
Secretary Name <b>Kenneth A. Gaisford</b>	Treasurer Name <b>Kenneth A. Gaisford</b>
Street Address <b>Same As Above</b>	Street Address <b>Same As Above</b>
City State Zip <b>Same As Above</b>	City State Zip <b>Same As Above</b>

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

Director Name <b>Kenneth A. Gaisford</b>	Director Name
Street Address <b>Same As Above</b>	Street Address
City State Zip <b>Same As Above</b>	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  
**2,000 SHS COM NO PAR VAL**

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

ISSUED SHARES  
Number of Shares Class/Series 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



\* 6 2 7 4 5 \*

File Date: 1-19-01  
Check No.: 6440  
By: KA

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.

Kenneth A. Gaisford 1/14/01  
Signature of Officer Date  
**Kenneth A. Gaisford**  
Print or Type Name of Officer  
**President**  
Title of Officer

**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: **62745** 2. Name of Corporation: **G & S AUTOMOTIVE SERVICE AND MACHINE SHOP, INC.**

3. Street Address Principal Business Office: **105 Broadway (Rear)** City: **Newport** State: **RI** Zip: **02840**  
4. Business Phone No.: **(401) 846-0794** 5. State of Incorporation: **RHODE ISLAND** 6. ~~8953~~

7. Brief Description of the Character of Business Conducted in Rhode Island  
**Automotive Repair Shop**

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

President Name	<b>Kenneth A. Gaisford</b>	Vice President Name	<b>Jason K. Gaisford</b>
Street Address	<b>80 Old County Road</b>	Street Address	<b>15 Faulkner Street</b>
City	<b>Westport MA 02789</b>	City	<b>Westport MA 02790</b>
Secretary Name	<b>Kenneth A. Gaisford</b>	Treasurer Name	<b>Kenneth A. Gaisford</b>
Street Address	<b>same as above</b>	Street Address	<b>same as above</b>
City		City	

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

Director Name	<b>Kenneth A. Gaisford</b>	Director Name	
Street Address	<b>Same as above</b>	Street Address	
City		City	
Director Name		Director Name	
Street Address		Street Address	
City		City	

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

AUTHORIZED SHARES  
Number of Shares Class/Series Par Value  
**2,000 SHS COM NO PAR VAL**

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

ISSUED SHARES  
Number of Shares Class/Series 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



\* 6 2 7 4 5 \*

File Date: 3/20/00  
Check No.: 5790  
By: [Signature]

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] 3/14/00  
Signature of Officer Date

**Kenneth A. Gaisford**  
Print or Type Name of Officer

[Signature]  
Title of Officer



**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. <b>62745</b>		2. Name of Corporation <b>G &amp; S AUTOMOTIVE SERVICE AND MACHINE SHOP, INC.</b>	
3. Street Address Principal Business Office <b>105 Broadway (Rear)</b>		City <b>Newport</b>	State <b>RI</b>
4. Business Phone No. <b>(401)846-0794</b>		5. State of Incorporation <b>RHODE ISLAND</b>	
7. Brief Description of the Character of Business Conducted in Rhode Island <b>Automotive Repair Shop</b>		6. SIC Code <b>8953</b>	
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) <b>FILL IN SPACES BEFORE USING ATTACHMENTS</b>			
President Name <b>Kenneth A. Gaisford</b>		Vice President Name <b>Jason K. Gaisford</b>	
Street Address <b>80 Old County Road</b>		Street Address <b>15 Faulkner Street</b>	
City <b>Westport</b>	State <b>MA</b>	City <b>Westport</b>	State <b>MA</b>
Zip <b>02790</b>		Zip <b>02790</b>	
Secretary Name <b>Kenneth A. Gaisford</b>		Treasurer Name <b>Kenneth A. Gaisford</b>	
Street Address <b>Same as above</b>		Street Address <b>Same as above</b>	
City <b></b>	State <b></b>	City <b></b>	State <b></b>
Zip <b></b>		Zip <b></b>	
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) <b>FILL IN SPACES BEFORE USING ATTACHMENTS</b>			
Director Name <b>Kenneth A. Gaisford</b>		Director Name <b></b>	
Street Address <b>Same as above</b>		Street Address <b></b>	
City <b></b>	State <b></b>	City <b></b>	State <b></b>
Zip <b></b>		Zip <b></b>	
Director Name <b></b>		Director Name <b></b>	
Street Address <b></b>		Street Address <b></b>	
City <b></b>	State <b></b>	City <b></b>	State <b></b>
Zip <b></b>		Zip <b></b>	
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT) AUTHORIZED SHARES			
Number of Shares	Class/Series	Par Value	
<b>2,000 SHS COM NO PAR VAL</b>			
11. SHARES ISSUED (*X* BOX FOR ATTACHMENT) ISSUED SHARES			
Number of Shares	Class/Series	Par Value	
<b>100</b>	<b>Common</b>	<b>No Par Value</b>	

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



\* 6 2 7 4 5 \*

File Date: Feb 24, 1999  
Check No.: 0000  
By: [Signature]

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: [Signature] Date: 2/23/99  
Print or Type Name of Officer: Kenneth A. Gaisford  
Title of Officer: President

**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. **62745** 2. Name of Corporation **G & S AUTOMOTIVE SERVICE AND MACHINE SHOP, INC.**  
3. Street Address Principal Business Office City State Zip  
**105 Broadway (Rear)** Newport RI **02840**  
4. Business Phone No. 5. State of Incorporation 6. SIC Code  
**(401) 846-0794** **RHODE ISLAND** **8953**

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

**Automotive Repair Shop**

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

President Name <b>Kenneth A. Gaisford</b> Street Address <b>80 Old County Road</b> City State Zip <b>Westport, MA 02790</b>	Vice President Name <b>Jason K. Gaisford</b> Street Address <b>15 Faulkner Street</b> City State Zip <b>Westport, MA 02790</b>
Secretary Name <b>Kenneth A. Gaisford</b> Street Address <b>Same as above</b> City State Zip <b>Westport, MA 02790</b>	Treasurer Name <b>Kenneth A. Gaisford</b> Street Address <b>Same as above</b> City State Zip <b>Westport, MA 02790</b>

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

Director Name <b>Kenneth A. Gaisford</b> Street Address <b>Same as above</b> City State Zip <b>Westport, MA 02790</b>	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
	<b>2,000 SHS COM NO PAR VAL</b>		

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

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

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



File Date: 2/24  
Check No.: 4331  
By: ICW  
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.

Kenneth A. Gaisford 1/19/98  
Signature of Officer Date  
**Kenneth A. Gaisford**  
Print or Type Name of Officer  
**President**  
Title of Officer



**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. **62745** 2. Name of Corporation **G & S AUTOMOTIVE SERVICE AND MACHINE SHOP, INC.**

3. Street Address Principal Business Office **105 Broadway (Rear)** City **Newport** State **RI** Zip **02840**

4. Business Phone No. **401-846-0794** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **3803 8953**

7. Brief Description of the Character of Business Conducted in Rhode Island  
**Automotive repair + repair auto motors**

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

President Name <b>Kenneth A. Gaisford</b> Street Address <b>80 Old County Rd.</b> City <b>Westport</b> State <b>MA</b> Zip <b>02790</b>	Vice President Name <b>Kenneth A. Gaisford</b> Street Address <b>80 Old County Rd.</b> City <b>Westport</b> State <b>MA</b> Zip <b>02790</b>
Secretary Name <b>Kenneth A. Gaisford</b> Street Address <b>80 Old County Rd.</b> City <b>Westport</b> State <b>MA</b> Zip <b>02790</b>	Treasurer Name <b>Kenneth A. Gaisford</b> Street Address <b>80 Old County Rd.</b> City <b>Westport</b> State <b>MA</b> Zip <b>02790</b>

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

Director Name <b>Kenneth A. Gaisford</b> Street Address <b>Same as above</b> City <b>Westport</b> State <b>MA</b> Zip <b>02790</b>	Director Name <b>Kenneth A. Gaisford</b> Street Address <b>Same as above</b> City <b>Westport</b> State <b>MA</b> Zip <b>02790</b>
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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
2,000 SHS COM NO PAR VAL	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

File Date: 11/27/97

Check No.: 3650

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: [Signature] Date: 11/27/97

Print or Type Name of Officer: Kenneth A. Gaisford

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) 277-3040

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

PLEASE TYPE OR PRINT IN BLACK INK.

1. CORPORATE ID NO. 62745		2. NAME OF CORPORATION G & S AUTOMOTIVE SERVICE AND MACHINE SHOP, INC.					
3. STREET ADDRESS, PRINCIPAL BUSINESS OFFICE 105 Broadway (Rear)				CITY Newport	STATE RI	ZIP CODE 02840	
4. BUSINESS PHONE NO. (401) 846-0794			5. STATE OF INCORPORATION RHODE ISLAND			6. SIC CODE 3533	
7. BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE ISLAND <del>Auto Parts Store</del> <b>Repair Shop</b> Automotive Repair Shop							
8. NAMES AND ADDRESSES OF THE OFFICERS							
PRESIDENT NAME Kenneth A. Gaisford				VICE PRESIDENT NAME			
STREET ADDRESS 80 Old County Road				STREET ADDRESS			
CITY Westport	STATE MA	ZIP CODE 02790		CITY	STATE	ZIP CODE	
SECRETARY NAME Kenneth A. Gaisford				TREASURER NAME Kenneth A. Gaisford			
STREET ADDRESS Same as above				STREET ADDRESS Same as above			
CITY	STATE	ZIP CODE		CITY	STATE	ZIP CODE	
9. NAMES AND ADDRESSES OF THE DIRECTORS							
DIRECTOR NAME Kenneth A. Gaisford				DIRECTOR NAME			
STREET ADDRESS Same as above				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	
2,000 SHS	COM NO PAR VAL			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 that all statements contained herein are true and correct.

*Kenneth A. Gaisford*  
Signature of Officer

Kenneth A. Gaisford  
Print or Type Name of Officer

President  
Title of Officer

December, 1995  
Date

File Date: 1/17/96  
Check No: 3055  
By: *AG/UP*  
For Secretary of State Use Only

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

Corporate ID: 0062745 Annual Report for the year: 1995

Name of Corporation: G & S AUTOMOTIVE SERVICE AND MACHINE SHOP, INC.

Business entity organized under the laws of the State of: Rhode Island

Business Entity is (check one):

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

Business Corporation (See RIGL Chapter 7-1.1)

Professional Service Corporation (See RIGL Chapter 7-5.1)

Phone: ( )

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

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

~~Auto Parts Store~~  
Auto Repair

6 Marlborough Street, Rear  
Newport, RI 02840

Phone: (401) 846-0794

**THE NAMES OF THE OFFICERS ARE:**

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
<u>Kenneth A. Gaisford</u>	<u>80 Old County Road</u>	<u>Westport, MA</u>	<u>02790</u>
<u>Kenneth A. Gaisford</u>	<u>Same as above</u>	<u>Same as above</u>	<u>Same as above</u>
<u>Kenneth A. Gaisford</u>	<u>Same as above</u>	<u>Same as above</u>	<u>Same as above</u>

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
<u>Kenneth A. Gaisford</u>	<u>Same as above</u>	<u>Same as above</u>	<u>Same as above</u>

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
<u>Kenneth A. Gaisford</u>	<u>Same as above</u>	<u>Same as above</u>	<u>Same as above</u>

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
<u>Kenneth A. Gaisford</u>	<u>Same as above</u>	<u>Same as above</u>	<u>Same as above</u>

**THE NAMES OF THE DIRECTORS ARE:**

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
<u>Kenneth A. Gaisford</u>	<u>Same as above</u>	<u>Same as above</u>	<u>Same as above</u>

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
<u>Kenneth A. Gaisford</u>	<u>Same as above</u>	<u>Same as above</u>	<u>Same as above</u>

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
<u>Kenneth A. Gaisford</u>	<u>Same as above</u>	<u>Same as above</u>	<u>Same as above</u>

NUMBER OF SHARES AUTHORIZED (Rider may be attached)

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

Number of Shares 2,000 Class / Series Common

Number of Shares 100 Class / Series Common

Date 1/20 19 95

By: Kenneth A. Gaisford

PRINT OR TYPE NAME OF OFFICER SIGNING

TITLE OF OFFICER SIGNING President

Form 3: 1995

**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.

RONALD J. LOWENSTEIN  
 40 WILLIAM STREET  
 NEWPORT RI 02840

EX # 2546 DP

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: 0062745 Annual Report for the year: 1994

Name of Business Entity: G & S AUTOMOTIVE SERVICE AND MACHINE SHOP

Business entity organized under the laws of the State of Rhode Island

Federal Taxpayer Identification Number: [REDACTED]

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

Phone: \_\_\_\_\_

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

6 Marlborough St., Rear  
Newport, RI 02840

Phone: 401-846-0794

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 7-1.6)

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

Kenneth A. Gaisford, President

80 Old County Rd.  
Westport, MA 02790

Brief statement of the character of business conducted in Rhode Island

Date of Organization: January 1990 c/o J. J. MNC

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

THE NAMES OF THE OFFICERS ARE:

PRESIDENT: Kenneth A. Gaisford 80 Old County Rd. Westport, MA 02790

VICE PRESIDENT: Kenneth A. Gaisford Same As Above

DIRECTOR: Kenneth A. Gaisford Same As Above

THE NAMES OF THE DIRECTORS ARE:

Kenneth A. Gaisford Same As Above

NUMBER OF SHARES AUTHORIZED (if Applicable)

NUMBER: 2,000

CLASS: Common

SERIES:

PAR VALUE OR WITHOUT PAR: No Par

NUMBER OF SHARES ISSUED AND OUTSTANDING (if Applicable)

NUMBER: 100

CLASS: Common

SERIES:

PAR VALUE OR WITHOUT PAR: No Par

**FILED**

**MAR 02 1994**

By J. J. MNC

Date: February, 1994

By: Kenneth A. Gaisford

Kenneth A. Gaisford

President

Form 91 - 1994

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.

RONALD J. LOWENSTEIN  
40 WILLIAM STREET  
NEWPORT RI 02840

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

1395

Corporate ID 0052745 Annual Report for the year 1993

FIRST: The name of the corporation is G & S AUTOMOTIVE SERVICE AND MACHINE SH

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is Auto parts store

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 6 West Marlborough St., Rear, Newport, R. I. 02840

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

Name	Office	Address (including number, street, zip code)
Kenneth A. Gaisford	Director	80 Old County Road, Westport, Ma.
	Director	
	Director	
Kenneth A. Gaisford	President	same as above
	Vice President	
Kenneth A. Gaisford	Secretary	same as above
Kenneth A. Gaisford	Treasurer	same as above

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
2,000	Common		No Par

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	Common		No Par



Dated January 22, 19 93

G & S AUTOMOTIVE SERVICE AND MACHINE SHOP, INC  
(Name of Corporation)

By Kenneth A. Gaisford

Title Kenneth A. Gaisford, President

(Report must be signed by an officer)

Filing Fee ~~\$15.00~~ <sup>650.00</sup>

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

# State of Rhode Island and Providence Plantations

1046RA

CORPORATIONS DIVISION  
270 WESTMINSTER MALL  
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 05-0459541 Annual Report for the year 1992

FIRST: The name of the corporation is G & S Automotive Service and Machine Shop, Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is To buy, sell, generally trade in, store, carry and transport all kinds of goods, wares, merchandise and raw materials of every nature and description.

FOURTH: If foreign corporation, address of its principal office.....

FIFTH: Business address in Rhode Island 6 Marlborough St., Newport, R. I. 02840

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

Name	Office	Address (including number, street, zip code)
Kenneth A. Gaisford	Director	90 Old County Road, Westport, Ma.
	Director	
	Director	
Kenneth A. Gaisford	President	same as above
	Vice President	
Kenneth A. Gaisford	Secretary	same as above
Kenneth A. Gaisford	Treasurer	same as above

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
2,000	Common	PAID	No Par

MAY 21 1992

SECY OF STATE

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	Common		No Par

Dated March 1, 19 92

G & S AUTOMOTIVE SERVICE AND MACHINE SHOP, INC.  
(Name of Corporation)

By Kenneth A. Gaisford

Title President

(Report must be signed by an officer)