



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Matthew A. Brown, Secretary of State

Corporations Division
100 North Main Street
Providence, RI 02903-1335
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

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

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 61958		2. Name of Corporation ATLANTIC PLYWOOD CORPORATION			
3. Street Address Principal Business Office 8 ROESSLER RD		City WOBYRN	State MA	Zip 01801	
4. Business Phone No. 781-933-1932		5. State of Incorporation MASSACHUSETTS		6. SIC Code 2618	
7. Brief Description of the Character of Business Conducted in Rhode Island WHOLESALE DISTRIBUTION OF PLYWOOD AND BUILDING PRODUCTS					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name PAUL VELLA			Vice President Name JOHN BLAKENEY		
Street Address 21 COLONIAL VILLAGE			Street Address 11 ROBERTA RD		
City HAMPTON	State MA	Zip 01036	City AUBURNDALE	State MA	Zip 02466
Secretary Name JOHN BLAKENEY			Treasurer Name JOHN BLAKENEY		
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 STEPHEN ALTMAN			Director Name		
Street Address 5 TEMBER REDGE			Street Address		
City MT KISCO	State NY	Zip 10549	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
250,000 COMM \$1.00 PAR VALUE			50,000	Common	1.00

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



61958

File Date	FILED
Check No.	FEB 24 2005 39319
By	By KB
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.

John R. Blakeney 2/11/05
Signature of Officer Date
John R. BLAKENEY
Print or Type Name of Officer
TREASURER
Title of Officer



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Matthew A. Brown, Secretary of State

Corporations Division
100 North Main Street
Providence, RI 02903-1335
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

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

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 61968		2. Name of Corporation ATLANTIC PLYWOOD CORPORATION			
3. Street Address Principal Business Office 8 ROESSLER RD		City WOBURN	State MA	Zip 01801	
4. Business Phone No. 718-933-1932		5. State of Incorporation MASSACHUSETTS		6. SIC Code 2618	
7. Brief Description of the Character of Business Conducted in Rhode Island WHOLESALE DISTRIBUTION OF PLYWOOD AND BUILDING PRODUCTS					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name PAUL VELLA			Vice President Name JOHN BLAKENEY		
Street Address 21 COLONIAL VILLAGE			Street Address 11 ROBERTA RD		
City HAMPDEN	State MA	Zip 02466	City NEWTON	State MA	Zip 02466
Secretary Name JOHN BLAKENEY			Treasurer Name JOHN BLAKENEY		
Street Address SEE ABOVE			Street Address SEE ABOVE		
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 STEPHEN ALTMAN			Director Name		
Street Address 5 T-FINDER REDGE			Street Address		
City MT KISCO	State NY	Zip 10549	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
3,000,000	COMMON	\$.01	1,206,167	COMMON	\$.01
3,000,000	PREFERRED A	\$.01	30,000	PREFERRED A	\$.01
100,000	PREFERRED B	\$.01	18,350	PREFERRED B	\$.01

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



* 6 1 9 6 8 *

File Date 4/22/04
Check No. 25882
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: JOHN R. BLAKENEY
Date: 2/12/04
Print or Type Name of Officer: JOHN R. BLAKENEY
Title of Officer: VICE PRESIDENT

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

Matthew A. Brown
Secretary of State

August 19, 2004

CT Corporation System
10 Weybosset Street
Providence, RI 02903

Re: **ID 61968**
ATLANTIC PLYWOOD CORPORATION

Dear Sir or Madam:

On April 22, 2004, this office accepted for filing a 2004 annual report for the above-named corporation. It has come to our attention the corporation altered the total number of authorized shares currently of record with this office.

The annual report is not the vehicle used to record a change in authorized shares. An increase in authorized shares must be record by filing with this office an Amended Certificate of Authority.

Enclosed you will find the forms necessary to complete the filing. If you have any questions, please feel free to contact me.

Sincerely,

CORPORATIONS DIVISION

Maureen E. Ewing

Maureen E. Ewing
Assistant to the Director

Enc.

Office of the
Secretary of State

State House Room 217
82 Smith Street
Providence RI 02903

Phone 401-222-2357
Fax 401-222-1356
TDD 711

U U U 5:25:17 U



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

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



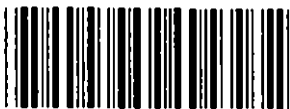
PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003

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

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 61968		2. Name of Corporation ATLANTIC PLYWOOD CORPORATION	
3. Street Address Principal Business Office 8 ROESSLER RD		City WOBYAN	State MA
4. Business Phone No. 781-933-1932		5. State of Incorporation MASSACHUSETTS	6. SIC Code 2618
7. Brief Description of the Character of Business Conducted in Rhode Island WHOLESALE DISTRIBUTION OF PLYWOOD & RELATED MATERIALS			
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name PAUL VELLA		Vice President Name JOHN BLAKENEY	
Street Address 21 COLONIAL VILLAGE		Street Address 11 ROBERTA RD	
City HAMPDEN	State MA	City NEWTON	State MA
Zip 00136		Zip 02466	
Secretary Name JOHN BLAKENEY		Treasurer Name JOHN BLAKENEY	
Street Address 11 ROBERTA RD		Street Address 11 ROBERTA RD	
City NEWTON	State MA	City NEWTON	State MA
Zip 02466		Zip 02466	
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS			
Director Name STEPHEN ALTMAN		Director Name	
Street Address 5 TEMBER RIDGE		Street Address	
City MT KISCO	State NY	City	State
Zip 10549		Zip	
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)			
AUTHORIZED SHARES			
Number of Shares	Class/Series	Par Value	
250,000 COMM	\$1.00 PAR VALUE		
11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)			
ISSUED SHARES			
Number of Shares	Class/Series	Par Value	
50,000	COMMON	\$1.00	

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



* 6 1 9 6 8 *

4.14.03

File Date: _____

Check No.: **11564**

By: **ICP**

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.

John R. Blakeney **2/18/03**
Signature of Officer Date

JOHN R. BLAKENEY
Print or Type Name of Officer

VICE PRESIDENT
Title of Officer



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

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



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 61968 2. Name of Corporation ATLANTIC PLYWOOD CORPORATION
3. Street Address Principal Business Office 8 ROESSLER RD City Woburn State MA Zip 01801
4. Business Phone No. 781-933-1932 5. State of Incorporation MASSACHUSETTS 6. SIC Code 2618

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

WHOLESALE DISTRIBUTION OF PLYWOOD AND RELATED MATERIALS

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

President Name <u>PAUL VELLA</u> Street Address <u>21 COLONIAL VILLAGE</u> City <u>HAMPDEN</u> State <u>MA</u> Zip <u>00136</u>	Vice President Name <u>JOHN BLAKENEY</u> Street Address <u>11 ROBERTA RD</u> City <u>NEWTON</u> State <u>MA</u> Zip <u>02466</u>
Secretary Name <u>JOHN BLAKENEY</u> Street Address <u>11 ROBERTA RD</u> City <u>NEWTON</u> State <u>MA</u> Zip <u>02466</u>	Treasurer Name <u>JOHN BLAKENEY</u> Street Address <u>11 ROBERTA RD</u> City <u>NEWTON</u> State <u>MA</u> Zip <u>02466</u>

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

Director Name <u>STEPHEN ALTMAN</u> Street Address <u>5 TIMBER RIDGE</u> City <u>MT KISCO</u> State <u>NY</u> Zip <u>10549</u>	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
<u>250,000</u>	<u>COMM</u>	<u>\$1.00</u>

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

ISSUED SHARES

Number of Shares	Class/Series	Par Value
<u>50,000</u>	<u>COMMON</u>	<u>1.00</u>

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



* 6 1 9 6 8 *

File Date: 4.24.02

Check No.: 46950

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.

John Blakeney 3/13/02
Signature of Officer Date

JOHN BLAKENEY
Print or Type Name of Officer

VICE PRESIDENT
Title of Officer



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

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



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **61968** 2. Name of Corporation **ATLANTIC PLYWOOD CORPORATION**

3. Street Address Principal Business Office **8 Roessler Road** City **Woburn** State **MA** Zip **01801**

4. Business Phone No. **(781) 933-3830** 5. State of Incorporation **MASSACHUSETTS** 6. SIC Code **2618**

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

Wholesale Distribution of Plywood and Building Products

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

President Name

Paul Vella

Street Address

21 Colonial Village

City **Hampden** State **MA** Zip **00136**

Secretary Name

John Blakeney

Street Address

11 Roberta Rd

City **Newton** State **MA** Zip **02466**

Vice President Name

John Blakeney

Street Address

11 Roberta Rd

City **Newton** State **MA** Zip **02466**

Treasurer Name

John Blakeney

Street Address

11 Roberta Rd

City **Newton** State **MA** Zip **02466**

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

Director Name

Stephen Altman

Street Address

5 Timber Ridge

City **Mt Kisco** State **NY** Zip **10549**

Director Name

Ira Starr

Street Address

City _____ State _____ Zip _____

Director Name

William Uaketta

Street Address

City _____ State _____ Zip _____

Director Name

Street Address

City _____ State _____ Zip _____

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

AUTHORIZED SHARES

Number of Shares	Class/Series	Par Value
3,000,000	Common	\$ 0.01
3,000,000	PREFERRED A	\$ 0.01
100,000	PREFERRED B	\$ 0.01

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

ISSUED SHARES

Number of Shares	Class/Series	Par Value
1,140,000	Common	11,400
30,000	PREFERRED A	300
15,000	PREFERRED B	150

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



* 6 1 9 6 8 *

File Date 5-29-01

Check No. 30121

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.

John R Blakeney 3/6/01
Signature of Officer Date

John R Blakeney
Print or Type Name of Officer

TREASURER / SECRETARY
Title of Officer



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

Edward S. Inman, III, Secretary of State

July 19, 2001

John Blakency, Vice President
Atlantic Plywood Corporation
8 Roessler Road
Woburn, MA 01801

RE: Atlantic Plywood Corporation

Dear Mr. Blackeney:

We are in receipt of the above-named corporation's 2001 annual report indicating an increase in the number of authorized shares.

Pursuant to RIGL Section 7-1.1-111, A foreign authorized to transact business in this state shall procure an amended certificate of authority if it increases its number of authorized shares. The documents and instructions required for the application to file the amended (form #151) can be obtained through this office or from our online forms library at www.state.ri.us.

If you have any questions, please feel free to contact me.

Very truly yours,

CORPORATIONS DIVISION

Maureen E. Ewing

Maureen E. Ewing
Assistant to the Director

Enc.

100 North Main Street
Providence
Rhode Island
02903-1355

Corporations/UCC.
401-222-3040
Fax: 401-222-1309

Elections.
401-222-2340
Fax: 401-222-1444

First Stop Business
Information Center
401-222-2185
Fax: 401-222-3890

Notary/Trademarks:
401-222-1487
Fax: 401-222-3879

www.state.ri.us



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

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



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 61968		2. Name of Corporation ATLANTIC PLYWOOD CORPORATION	
3. Street Address Principal Business Office 8 Roessler Road		City Woburn	State MA
4. Business Phone No. (781) 933-1932		5. State of Incorporation MASSACHUSETTS	Zip 01801
6. SIC Code 2618			
7. Brief Description of the Character of Business Conducted in Rhode Island Wholesale Sales - Plywood			
8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name Paul Vella		Vice President Name Stephen Altman	
Street Address 8 Roessler Road		Street Address 8 Roessler Road	
City Woburn	State MA	City Woburn	State MA
Secretary Name John Blakeney		Treasurer Name John Blakeney	
Street Address 8 Roessler Road		Street Address 8 Roessler Road	
City Woburn	State MA	City Woburn	State MA
9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS		Director Name Ira Starr	
Street Address 25 Crossbroke Rd		Street Address 65 Church Lane	
City Concord	State MA	City Scarsdale	State NY
Director Name William C. Ughetta Jr.		Director Name Paul Vella	
Street Address 55 East 72nd Street		Street Address 21 Colonial Village	
City New York	State NY	City Hampden	State MA
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)		11. SHARES ISSUED ("X" BOX FOR ATTACHMENT)	
AUTHORIZED SHARES		ISSUED SHARES	
Number of Shares 250,000	Class/Series Common	Par Value \$1.00	Number of Shares 50,000
		Class/Series Common	Par Value \$1.00

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



* 6 1 9 6 8 *

File Date: **3-15-00**
Check No: **010052**
By: **RD**

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: **John R. Blakeney** Date: **3/1/2000**
Print or Type Name of Officer: **John Blakeney**
Title of Officer: **Treasurer**



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

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

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR **1999**

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

(FORM MUST BE TYPED IN BLACK)



1. Corporate ID No. 61968		2. Name of Corporation ATLANTIC PLYWOOD CORPORATION	
3. Street Address Principal Business Office 8 Roessler Road		City Woburn	State MA
4. Business Phone No. 617-933-1932		5. State of Incorporation MASSACHUSETTS	6. SIC Code 2618
7. Brief Description of the Character of Business Conducted in Rhode Island Sale of Plywood			
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name Nicholas L. Cucci		Vice President Name Nicholas L. Cucci	
Street Address 25 Cressbrook Road		Street Address 25 Cressbrook Road	
City Concord	State MA	City Concord	State MA
Secretary Name Nicholas L. Cucci		Treasurer Name	
Street Address 25 Cressbrook Road		Street Address	
City Concord	State MA	City	State
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS			
Director Name Nicholas L. Cucci		Director Name	
Street Address 25 Cressbrook Road		Street Address	
City Concord	State MA	City	State
Director Name Carol L. Cucci		Director Name	
Street Address 25 Cressbrook Road		Street Address	
City Concord	State MA	City	State
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)			
11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)			
AUTHORIZED SHARES		ISSUED SHARES	
Number of Shares	Class/Series	Number of Shares	Class/Series
250,000	Common	50,000	Common
Par Value		Par Value	
NPV		NPV	

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



* 6 1 9 6 8 *

File Date: **03-29-99**

Check No.: **8173**

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

Nicholas L. Cucci

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 02903-1335
401-277-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1998
Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **61968** 2. Name of Corporation **ATLANTIC PLYWOOD CORPORATION**
3. Street Address Principal Business Office **8 ROESSLER ROAD** City **WOBURN** State **MA** Zip **01801**
4. Business Phone No. **617-933-1932** 5. State of Incorporation **MASSACHUSETTS** 6. SIC Code **2618**
7. Brief Description of the Character of Business Conducted in Rhode Island
SALE OF PLYWOOD

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

President Name NICHOLAS L. CUCCI Street Address 25 CRESSBROOK ROAD City CONCORD State MA Zip 01742	Vice President Name NICHOLAS L. CUCCI Street Address 25 CRESSBROOK ROAD City CONCORD State MA Zip 01742
Secretary Name NICHOLAS L. CUCCI Street Address 25 CRESSBROOK ROAD City CONCORD State MA Zip 01742	Treasurer Name Street Address City State Zip

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

Director Name NICHOLAS L. CUCCI Street Address 25 CRESSBROOK ROAD City CONCORD State MA Zip 01742	Director Name Street Address City State Zip
Director Name CAROL L. CUCCI Street Address 25 CRESSBROOK ROAD City CONCORD State MA Zip 01742	Director Name Street Address City State Zip

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

Number of Shares	Class/Series	Par Value
250,000	COMMON	NPV

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

Number of Shares	Class/Series	Par Value
50,000	COMMON	NPV

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



File Date: 3/12
Check No.: 03966
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: 3/10/98
NICHOLAS L. CUCCI
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 02903-1335
401-277-3040



PROFIT CORPORATION ANNUAL REPORT 1997

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **61968** 2. Name of Corporation **ATLANTIC PLYWOOD CORPORATION**
3. Street Address Principal Business Office **8 Roessler Road** City **Woburn** State **MA** Zip **01801**
4. Business Phone No. **617-933-1932** 5. State of Incorporation **MASSACHUSETTS** 6. SIC Code **2618**

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

Sale of Plywood

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

President Name Nicholas L. Cucci Street Address 25 Cressbrook Road City Concord State MA Zip 01742 Secretary Name Nicholas L. Cucci Street Address 25 Cressbrook Road City Concord State MA Zip 01742	Vice President Name Nicholas L. Cucci Street Address 25 Cressbrook Road City Concord State MA Zip 01742 Treasurer Name Street Address City State Zip
--	--

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

Director Name Nicholas L. Cucci Street Address 25 Cressbrook Road City Concord State MA Zip 01742 Director Name Carol L. Cucci Street Address 25 Cressbrook Road City Concord State MA Zip 01742	Director Name Street Address City State Zip Director Name Street Address City State Zip
---	--

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

AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
250,000	Common	NPV	50,000	Common	NPV

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



* 6 1 9 6 8 *

File Date: **3/17/97**
Check No.: **2946**
By: **ccf**

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 **Nicholas L. Cucci** Date **3-14-97**

Print or Type Name of Officer
Nicholas L. Cucci

Title of Officer
President

PROFIT CORPORATON ANNUAL REPORT

1996

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



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

PLEASE TYPE OR PRINT IN BLACK INK.

1 CORPORATE ID NO. 0061968		2 NAME OF CORPORATION ATLANTIC PLYWOOD CORP.	
3 STREET ADDRESS PRINCIPAL BUSINESS OFFICE 8 ROESSLER ROAD		CITY WOBURN	STATE MA
4 BUSINESS PHONE NO. (617) 933-3830		5 STATE OF INCORPORATION MASSACHUSETTS	ZIP CODE 01801
7 BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE ISLAND SALE OF PLYWOOD			6 SIC CODE 2618

8 NAMES AND ADDRESSES OF OFFICERS			
PRESIDENT NAME NICHOLAS L. CUCCI		VICE PRESIDENT NAME NICHOLAS L. CUCCI	
STREET ADDRESS 25 CRESSBROOK ROAD		STREET ADDRESS 25 CRESSBROOK ROAD	
CITY CONCORD	STATE MA	ZIP CODE 01742	CITY CONCORD
SECRETARY NAME NICHOLAS L. CUCCI		TREASURER NAME NICHOLAS L. CUCCI	
STREET ADDRESS 25 CRESSBROOK ROAD		STREET ADDRESS 25 CRESSBROOK ROAD	
CITY CONCORD	STATE MA	ZIP CODE 01742	CITY CONCORD
9 NAMES AND ADDRESSES OF DIRECTORS		10 NAMES AND ADDRESSES OF DIRECTORS	
DIRECTOR NAME NICHOLAS L. CUCCI		DIRECTOR NAME CAROL L. CUCCI	
STREET ADDRESS 25 CRESSBROOK ROAD		STREET ADDRESS 25 CRESSBROOK ROAD	
CITY CONCORD	STATE MA	ZIP CODE 01742	CITY CONCORD
DIRECTOR NAME		DIRECTOR NAME	
STREET ADDRESS		STREET ADDRESS	
CITY	STATE	ZIP CODE	CITY

11 AUTHORIZED SHARES			12 ISSUED SHARES		
NUMBER OF SHARES	CLASS / SERIES	PAR VALUE	NUMBER OF SHARES	CLASS / SERIES	PAR VALUE
250,000	COMMON	\$1.00	50,000	COMMON	\$1.00

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: 5/17/94

Check No: 17738

By:
For Secretary of State Use Only

Signature of Officer
NICHOLAS L. CUCCI

Print or Type Name of Officer

PRESIDENT

Title of Officer

5/17/94
Date

State of Rhode Island and Providence Plantations



Office of The Secretary of State

100 North Main Street

Providence, Rhode Island 02903-1335

401-277-3040

ANNUAL REPORT

Please Type or Print

File Annually - Jan. 1 - March 1

Filing Fee \$50.00

Make Checks Payable to: Secretary of State

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

0061968

1995

Corporate ID: _____ Annual Report for the year: _____

ATLANTIC PLYWOOD CORPORATION

Name of Corporation: _____

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:

☒ Business Corporation (See RIGL Chapter 7-1.1)☐ Professional Service Corporation (See RIGL Chapter 7-5.1)8 ROESSLER ROADWOBURN, MA 01801Phone: (617) 933-1932

Address and telephone of the principal office of business entity in Rhode

Island (Provide street address - Not P.O. Box):

NONE

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

SALE OF PLYWOODPhone: ()**THE NAMES OF THE OFFICERS ARE:**

PRESIDENT STREET ADDRESS CITY/STATE ZIP CODE

NICHOLAS L. CUCCI25 CRESSBROOK ROAD,CONCORD, MA01742

VICE PRESIDENT STREET ADDRESS CITY/STATE ZIP CODE

SECRETARY STREET ADDRESS CITY/STATE ZIP CODE

TREASURER STREET ADDRESS CITY/STATE ZIP CODE

NICHOLAS L. CUCCI25 CRESSBROOK ROAD,CONCORD, MA01742**THE NAMES OF THE DIRECTORS ARE:**

NAME STREET ADDRESS CITY/STATE ZIP CODE

NICHOLAS L. CUCCI25 CRESSBROOK ROAD,CONCORD, MA01742

NAME STREET ADDRESS CITY/STATE ZIP CODE

CAROL CUCCI25 CRESSBROOK ROAD,CONCORD, MA01742

NAME STREET ADDRESS CITY/STATE ZIP CODE

NUMBER OF SHARES AUTHORIZED (Rider may be attached)

Number of Shares Class / Series

250,000COMMON

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

Number of Shares Class / Series

50,000COMMONDate 6/13/95, 1995By: NICHOLAS L. CUCCI

PRINT OR TYPE NAME OF OFFICER SIGNING

TITLE OF OFFICER SIGNING

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 RI 02903

PAID

JUN 15 1995
TPO17738
SECRETARY OF STATE

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 0061968 Annual Report for the year 1994

Name of Business Entity ATLANTIC PLYWOOD CORPORATION

Business entity organized under the laws of the State of Massachusetts

Federal Taxpayer Identification Number

For foreign entity, address and telephone number of principal office

8 Roessler Road

Woburn, MA 01801

Phone 617 933-1932

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

None

Business Entity is (check one)

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

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

Nick Gucci

Atlantic Plywood Corporation

8 Roessler Road

Woburn, MA 01801

Best statement of the character of business conducted in Rhode Island

Sale of Plywood

Date of Organization 7/9/74

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

7/9/74 9/28/90 rem

THE NAMES OF THE OFFICERS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
Nicholas L. Gucci	25 Cressbrook Road	Concord, MA	01742
Nicholas L. Gucci	25 Cressbrook Road	Concord, MA	01742
Nicholas L. Gucci	25 Cressbrook Road	Concord, MA	01742
Nicholas L. Gucci	25 Cressbrook Road	Concord, MA	01742

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
Nicholas L. Gucci	25 Cressbrook Road	Concord, MA	01742
Carol L. Gucci	25 Cressbrook Road	Concord, MA	01742

NUMBER OF SHARES AUTHORIZED (if Applicable)

NUMBER 250,000

CLASS Common

SERIES

PAR VALUE OR
WITHOUT PAR \$1.00

NUMBER OF SHARES ISSUED AND OUTSTANDING (if Applicable)

NUMBER 50,000

CLASS Common

SERIES

PAR VALUE OR
WITHOUT PAR \$1.00

Date 6/7/94

By President

Nicholas L. Gucci

SECRETARY OF STATE

Signature of Nicholas L. Gucci

Form 31 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

CT CORPORATION SYSTEM
123 DYER STREET
PROVIDENCE RI 02903

JUN 9 1994
rem CR 7771