



**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. 46475		2. Name of Corporation ABS Printing, Inc.			
3. Street Address Principal Business Office 173 Washington Street			City West Warwick	State RI	Zip 02893
4. Business Phone No 401 8/26-0870		5. State of Incorporation RHODE ISLAND			6. SIC Code 851
7. Brief Description of the Character of Business Conducted in Rhode Island TO CARRY ON A GENERAL PRINTING, ENGRAVING LITHOGRAPHING, ELECTROTYPING & Publishing Business.					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Bruce A. Demoranville			Vice President Name None		
Street Address 837 Pearse Road			Street Address		
City Swansea	State MA	Zip 02777	City	State	Zip
Secretary Name Bruce A. Demoranville, Jr.			Treasurer Name Bruce A. Demoranville		
Street Address 201 Diamond Hill Road			Street Address 837 Pearse Road		
City Warwick	State RI	Zip 02886	City Swansea	State MA	Zip 02777
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Bruce A. Demoranville			Director Name Melanie Demoranville		
Street Address 837 Pearse Road			Street Address 837 Pearse Road		
City Swansea	State MA	Zip 02777	City Swansea	State MA	Zip 02777
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
8,000	COMM	NO PAR VALUE	1,000	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.

Bruce A. Demoranville 2/28/05  
Signature of Officer Date

Bruce A. Demoranville

Print or Type Name of Officer

President

Title of Officer

File Date 2-15-05  
9338  
Check No.  
By: z

FOR SECRETARY OF STATE USE ONLY



**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. <b>46475</b>		2. Name of Corporation <b>ABS Printing, Inc.</b>		
3. Street Address Principal Business Office <b>173 Washington Street</b>			City <b>West Warwick</b>	State <b>RI</b>
4. Business Phone No. <b>(401) 826-0870</b>		5. State of Incorporation <b>RHODE ISLAND</b>		6. SIC Code <b>851</b>
7. Brief Description of the Character of Business Conducted in Rhode Island <b>TO CARRY ON A GENERAL PRINTING, ENGRAVING LITHOGRAPHING, ELECTROTYPING, &amp; PUBLISHING BUSINESS.</b>				
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
President Name <b>Bruce A. Demoranville</b>			Vice President Name <b>None</b>	
Street Address <b>837 Pearse Road</b>			Street Address	
City <b>Swansea</b>	State <b>MA</b>	Zip <b>02777</b>	City	State
Secretary Name <b>Bruce A. Demoranville, Jr.</b>			Treasurer Name <b>Bruce A. Demoranville</b>	
Street Address <b>201 Diamond Hill Road</b>			Street Address <b>837 Pearse Road</b>	
City <b>Warwick</b>	State <b>RI</b>	Zip <b>02886</b>	City <b>Swansea</b>	State <b>MA</b>
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
Director Name <b>Bruce A. Demoranville</b>			Director Name <b>Melanie Demoranville</b>	
Street Address <b>837 Pearse Road</b>			Street Address <b>837 Pearse Road</b>	
City <b>Swansea</b>	State <b>MA</b>	Zip <b>02777</b>	City <b>Swansea</b>	State <b>MA</b>
Director Name			Director Name	
Street Address			Street Address	
City	State	Zip	City	State
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
<b>8,000</b>	<b>COMM NO PAR VALUE</b>		<b>1,000</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



\* 4 6 4 7 5 \*

File Date 1-23-04  
Check No. 8834  
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.

Bruce A. Demoranville 1/21/04  
Signature of Officer Date

Bruce A. Demoranville  
Print or Type Name of Officer

President  
Title of Officer



**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. **46475** 2. Name of Corporation **ABS Printing, Inc.**  
3. Street Address Principal Business Office **173 Washington Street** City **West Warwick** State **RI** Zip **02893**  
4. Business Phone No. **(401) 826-0870** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **851**  
7. Brief Description of the Character of Business Conducted in Rhode Island  
**Printing and photo copying**

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

President Name <b>Bruce A. Demoranville</b>	Vice President Name <b>None</b>
Street Address <b>837 Pearse Road</b>	Street Address
City <b>Swansea</b> State <b>MA</b> Zip <b>02777</b>	City State Zip
Secretary Name <b>Bruce A. Demoranville, Jr.</b>	Treasurer Name <b>Bruce A. Demoranville</b>
Street Address <b>201 Diamond Hill Road</b>	Street Address <b>837 Pearse Road</b>
City <b>Warwick</b> State <b>RI</b> Zip <b>02886</b>	City <b>Swansea</b> State <b>MA</b> Zip <b>02777</b>

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

Director Name <b>Bruce A. Demoranville</b>	Director Name <b>Melanie Demoranville</b>
Street Address <b>837 Pearse Road</b>	Street Address <b>837 Pearse Road</b>
City <b>Swansea</b> State <b>MA</b> Zip <b>02777</b>	City <b>Swansea</b> State <b>MA</b> Zip <b>02777</b>
Director Name	Director Name
Street Address	Street Address
City State Zip	City State Zip

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

AUTHORIZED SHARES	Class/Series	Par Value
8,000 COMM NO PAR VALUE	Common	no par Value

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

ISSUED SHARES	Class/Series	Par Value
1,000	Common	no par value

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



\* 4 6 4 7 5 \*

File Date: 1-30-03  
Check No.: 8295  
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.

Bruce A. Demoranville 1-20-03  
Signature of Officer Date

Bruce A. Demoranville  
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. **46475** 2. Name of Corporation **ABS Printing, Inc.**  
 3. Street Address Principal Business Office **173 Washington Street** City **West Warwick** State **RI** Zip **02893**  
 4. Business Phone No. **(401) 826-0870** 5. State of Incorporation **Rhode Island** 6. SIC Code **851**  
 7. Brief Description of the Character of Business Conducted in Rhode Island  
**Printing and photo copying**

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

President Name <b>Bruce A. Demoranville</b>	Vice President Name <b>None</b>
Street Address <b>837 Pearse Road</b>	Street Address
City State Zip <b>Swansea MA 02777</b>	City State Zip

Secretary Name <b>Bruce A. Demoranville, Jr.</b>	Treasurer Name <b>Bruce A. Demoranville</b>
Street Address <b>201 Diamond Hill Road</b>	Street Address <b>837 Pearse Road</b>
City State Zip <b>Warwick RI 02886</b>	City State Zip <b>Swansea, MA 02777</b>

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

Director Name <b>Bruce A. Demoranville</b>	Director Name <b>Melanie Demoranville</b>
Street Address <b>837 Pearse Road</b>	Street Address <b>837 Pearse Road</b>
City State Zip <b>Swansea MA 02777</b>	City State Zip <b>Swansea MA 02777</b>

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

AUTHORIZED SHARES		
Number of Shares	Class/Series	Par Value
8000	Common	no par value

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

ISSUED SHARES		
Number of Shares	Class/Series	Par Value
1,000	Common	no par value

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

**FILED**

**MAR 15 2002**

File Date: \_\_\_\_\_  
 Check No.: \_\_\_\_\_  
 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] 1-25-02  
 Signature of Officer Date

**Bruce A. Demoranville**

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. 46475  
2. Name of Corporation ABS Printing, Inc.  
3. Street Address Principal Business Office 173 Washington Street  
City West Warwick State RI Zip 02893  
4. Business Phone No. (401) 826-0870  
5. State of Incorporation Rhode Island  
6. SIC Code 851

7. Brief Description of the Character of Business Conducted in Rhode Island  
Printing and photo copying

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

President Name Bruce A. Demoranville Street Address 837 Pearse Road City Swansea State MA Zip 02777	Vice President Name None Street Address City State Zip
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Secretary Name Bruce A. Demoranville, Jr. Street Address 201 Diamond Hill Road City Warwick State RI Zip 02886	Treasurer Name Bruce A. Demoranville Street Address 837 Pearse Road City Swansea State MA Zip 02777
--	---

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

Director Name Bruce A. Demoranville Street Address 837 Pearse Road City Swansea State MA Zip 02777	Director Name Melanie Demoranville Street Address 837 Pearse Road City Swansea State MA Zip 02777
--	---

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

AUTHORIZED SHARES	Number of Shares	Class/Series	Par Value
	8000	Common	no par value

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

ISSUED SHARES	Number of Shares	Class/Series	Par Value
	1,000	Common	no par value

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

FILED  
MAR 15 2002  
By [Signature]  
28280

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: Bruce A. Demoranville  
Date: 2-1-01  
Print or Type Name of Officer: Bruce A. Demoranville  
Title of Officer: President

File Date: \_\_\_\_\_  
Check No.: \_\_\_\_\_  
By: \_\_\_\_\_  
FOR SECRETARY OF STATE USE ONLY



**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. 46475  
2. Name of Corporation ABS Printing, Inc.  
3. Street Address Principal Business Office 173 Washington Street  
City West Warwick State RI Zip 02893  
4. Business Phone No. (401) 826-0870  
5. State of Incorporation RHODE ISLAND  
6. SIC Code 851  
7. Brief Description of the Character of Business Conducted in Rhode Island  
Printing and photo copying

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

President Name Bruce A. Demoranville	Vice President Name None
Street Address 837 Pearse Road	Street Address
City State Zip Swansea MA 02777	City State Zip
Secretary Name Bruce A. Demoranville, Jr.	Treasurer Name Bruce A. Demoranville
Street Address 173 Washington Street	Street Address 837 Pearse Road
City State Zip West Warwick RI 02893	City State Zip Swansea MA 02777

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

Director Name Bruce A. Demoranville	Director Name Melanie Demoranville
Street Address 837 Pearse Road	Street Address 837 Pearse Road
City State Zip Swansea MA 02777	City State Zip Swansea MA 02777
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
8,000	Common	No Par Value

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

ISSUED SHARES		
Number of Shares	Class/Series	Par Value
1,000	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: 2-16-00  
Check No.: 7025  
By: AMF

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.

Bruce A. Demoranville 2-9-00  
Signature of Officer Date

Bruce A. Demoranville  
Print or Type Name of Officer

President  
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>46475</b>		2. Name of Corporation <b>ABS Printing, Inc.</b>	
3. Street Address Principal Business Office <b>250 Cowesett Avenue</b>		City <b>West Warwick</b>	State <b>RI</b>
4. Business Phone No. <b>(401) 826-0870</b>		5. State of Incorporation <b>RHODE ISLAND</b>	Zip <b>02893</b>
7. Brief Description of the Character of Business Conducted in Rhode Island <b>Printing and photo copying</b>		6. SIC Code <b>851</b>	

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name <b>Bruce A. Demoranville</b>		Vice President Name <b>None</b>	
Street Address <b>837 Pearse Road</b>		Street Address	
City <b>Swansea,</b>	State <b>MA</b>	Zip <b>02777</b>	
Secretary Name <b>Bruce A. Demoranville, Jr.</b>		Treasurer Name <b>Bruce A. Demoranville</b>	
Street Address <b>700 Metacom Avenue</b>		Street Address <b>837 Pearse Road</b>	
City <b>Warren</b>	State <b>RI</b>	Zip <b>02885</b>	City <b>Swansea</b>
			State <b>MA</b>
			Zip <b>02777</b>

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
Director Name <b>Bruce A Demoranville</b>		Director Name <b>Melanie Demoranville</b>	
Street Address <b>837 Pearse Road</b>		Street Address <b>837 Pearse Road</b>	
City <b>Swansea</b>	State <b>MA</b>	Zip <b>02777</b>	City <b>Swansea</b>
			State <b>MA</b>
			Zip <b>02777</b>
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
<b>8,000</b>	<b>COMM NO PAR VAL</b>		<b>1,000</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: **Feb 10, 99**

Check No.: **6677**

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.

*Bruce A. Demoranville* **2-1-99**

Signature of Officer Date

**Bruce A. Demoranville**

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. **46475** 2. Name of Corporation **ABS Printing, Inc.**  
3. Street Address Principal Business Office  
**250 Cowesett Avenue** City **West Warwick** State **RI** Zip **02893**  
4. Business Phone No. **(401) 826-0870** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **0851**  
7. Brief Description of the Character of Business Conducted in Rhode Island  
**Printing and photo copying**

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

President Name <b>Bruce A. Demoranville</b>	Vice President Name <b>None</b>
Street Address <b>837 Pearse Road</b>	Street Address
City <b>Swansea</b> State <b>MA</b> Zip <b>02777</b>	City State Zip
Secretary Name <b>Bruce A. Demoranville, Jr.</b>	Treasurer Name <b>Bruce A. Demoranville</b>
Street Address <b>700 Metacom Avenue</b>	Street Address <b>837 Pearse Road</b>
City <b>Warren</b> State <b>RI</b> Zip <b>02885</b>	City <b>Swansea</b> State <b>MA</b> Zip <b>02777</b>

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

Director Name <b>Bruce A. Demoranville</b>	Director Name <b>Melanie Demoranville</b>
Street Address <b>837 Pearse Road</b>	Street Address <b>837 Pearse Road</b>
City <b>Swansea</b> State <b>MA</b> Zip <b>02777</b>	City <b>Swansea</b> State <b>MA</b> Zip <b>02777</b>
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
<b>8,000</b>	<b>COMM</b>	<b>NO PAR VAL</b>

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

ISSUED SHARES		
Number of Shares	Class/Series	Par Value
<b>1,000</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: 1-22-98  
Check No.: 6292  
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.

Bruce A. Demoranville 1-19-98  
Signature of Officer Date

Bruce A. Demoranville  
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. **46475** 2. Name of Corporation **ABS Printing, Inc.**  
3. Street Address Principal Business Office **250 Cowesett Avenue** City **West Warwick** State **RI** Zip **02893**  
4. Business Phone No. **(401) 826-0870** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **0851**

7. Brief Description of the Character of Business Conducted in Rhode Island  
**Printing and photo copying**

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

President Name <b>Bruce A. Demoranville</b>	Vice President Name <b>None</b>
Street Address <b>837 Pearse Road</b>	Street Address
City State Zip <b>Swanea MA 02777</b>	City State Zip
Secretary Name <b>John Holt</b>	Treasurer Name <b>Bruce A. Demoranville</b>
Street Address <b>4 Ivy Road</b>	Street Address <b>837 Pearse Road</b>
City State Zip <b>Coventry RI 02816</b>	City State Zip <b>Swanea MA 02777</b>

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

Director Name <b>Bruce A. Demoranville</b>	Director Name <b>Melanie Demoranville</b>
Street Address <b>837 Pearse Road</b>	Street Address <b>837 Pearse Road</b>
City State Zip <b>Swanea MA 02777</b>	City State Zip <b>Swanea MA 02777</b>
Director Name	Director Name
Street Address	Street Address
City State Zip	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
<b>8,000</b>	<b>COMM</b>	<b>NO PAR VAL</b>	<b>1,000</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: 1/24/97  
Check No.: 5986  
By: GAA/WAC  
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.  
Bruce A. Demoranville 1-20-97  
Signature of Officer Date  
Bruce A. Demoranville  
Print or Type Name of Officer  
President  
Title of Officer

# 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. 46475		2. NAME OF CORPORATION ABS Printing, Inc.		
3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE 250 Cowesett Avenue		CITY West Warwick	STATE RI	ZIP CODE 02893
4. BUSINESS PHONE NO. (401) 826-0870		5. STATE OF INCORPORATION RHODE ISLAND		6. SIC CODE 0851
7. BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE ISLAND Printing and photo copying				

### B. NAMES AND ADDRESSES OF THE OFFICERS

PRESIDENT NAME Bruce A. Demoranville			VICE PRESIDENT NAME None		
STREET ADDRESS 837 Pearse Road			STREET ADDRESS		
CITY Swansea	STATE MA	ZIP CODE 02777	CITY	STATE	ZIP CODE
SECRETARY NAME John Holt			TREASURER NAME Bruce A. Demoranville		
STREET ADDRESS 4 Ivy Road			STREET ADDRESS 837 Pearse Road		
CITY Coventry	STATE RI	ZIP CODE 02816	CITY Swansea	STATE MA	ZIP CODE 02777

### B. NAMES AND ADDRESSES OF THE DIRECTORS

DIRECTOR NAME Bruce A. Demoranville			DIRECTOR NAME Melanie Demoranville		
STREET ADDRESS 837 Pearse Road			STREET ADDRESS 837 Pearse Road		
CITY Swansea	STATE MA	ZIP CODE 02777	CITY Swansea	STATE MA	ZIP CODE 02777
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
8,000	COMM NO PAR VAL		1,000	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.

*Bruce A. Demoranville*  
Signature of Officer

Bruce A. Demoranville  
Print or Type Name of Officer

President  
Title of Officer

Date

File Date: 1/25/96

Check No: 4375

By: *[Signature]*  
For Secretary of State Use Only



**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: 0048475 Annual Report for the year: 1995

Name of Corporation: ABS PRINTING, INC.

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

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

Business Entity is (check one):  
 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:  
Printing & photo copying

Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box):  
250 Cowesett Avenue  
West Warwick, RI 02893

Phone: ( 401 ) 826-0870

**THE NAMES OF THE OFFICERS ARE:**

PRESIDENT	STREET ADDRESS	CITY/STATE	ZIP CODE
Bruce A. Demoranville	837 Pearse Road,	Swansea, MA	02777
VICE PRESIDENT	STREET ADDRESS	CITY/STATE	ZIP CODE
None			
SECRETARY	STREET ADDRESS	CITY/STATE	ZIP CODE
John Holt	4 Ivy Road,	Coventry, RI	02816
TREASURER	STREET ADDRESS	CITY/STATE	ZIP CODE
Bruce A. Demoranville	837 Pearse Road,	Swansea, MA	02777

**THE NAMES OF THE DIRECTORS ARE:**

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
Bruce A. Demoranville	837 Pearse Road,	Swansea, MA	02777
Melanie Demoranville	837 Pearse Road,	Swansea, MA	02777

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
8,000	No par common	1,000	No par common

Date March 22, 1995

By: Bruce A. Demoranville  
 PRINT OR TYPE NAME OF OFFICER SIGNING Bruce A. Demoranville  
 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.

JOHN HOLT/ABS PRINTING  
 250 COWESETT AVENUE  
 WEST WARWICK RI 02893

PAID  
 KID 5544  
 OCT 13 1995  
 SECY OF STATE

# State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION  
100 NORTH MAIN STREET  
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 0045475 Annual Report for the year ~~XXXX~~ 1994

FIRST: The name of the corporation is ABS Printing, Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is General Printing Business

FOURTH: If foreign corporation, address of its principal office N/A

FIFTH: Business address in Rhode Island 250 Cowesett Avenue, West Warwick, RI 02893

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

Name	Office	Address (including number, street, zip code)
<u>Bruce A. Demoranville</u>	<u>Director</u>	<u>837 Pearse Rd., Swansea, MA 02777</u>
<u>Melanie Demoranville</u>	<u>Director</u>	<u>837 Pearse Rd., Swansea, MA 02777</u>
	<u>Director</u>	
<u>Bruce A. Demoranville</u>	<u>President</u>	<u>837 Pearse Road, Swansea, MA 02777</u>
<u>None</u>	<u>Vice President</u>	
<u>John Holt</u>	<u>Secretary</u>	<u>4 Ivy Rd., Coventry, RI 02816</u>
<u>Bruce Demoranville</u>	<u>Treasurer</u>	<u>837 Pearse Rd., Swansea, MA 02777</u>

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
<u>8,000</u>	<u>common</u>		<u>no par</u>

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
<u>1,000</u>	<u>common</u>		<u>no par</u>

## FILED

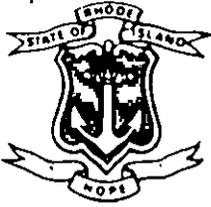
MAR 8 1994

By Bruce A. Demoranville #5035

Dated 2-1- 19 94

ABS Printing, Inc.  
(Name of Corporation)  
By Bruce A. Demoranville  
Title President

(Report must be signed by an officer)



State of Rhode Island and Providence Plantations  
Barbara M. Leonard  
Secretary of State  
100 North Main Street  
Providence, Rhode Island  
02903-1335

SUPPLEMENT TO 1994 ANNUAL REPORT

Corporation Name: ABS Printing, Inc.

Federal Taxpayer Identification Number: 05-0438736

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

\_\_\_\_\_

\_\_\_\_\_

Phone ( ) \_\_\_\_\_

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

250 Cowesett Avenue  
West Warwick, RI 02893

Phone ( 401 ) 826-0870

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)

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

John Holt, Secretary  
ABS Printing, Inc.  
250 Cowesett Avenue  
West Warwick, RI 02893

RECEIVED  
SECRETARY OF STATE  
OFFICE OF THE SECRETARY  
JUN 27 3 07 PM '94

Date of organization: March 29, 1988

Date of qualification to do business in Rhode Island (if foreign entity): \_\_\_\_\_

# State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION  
100 NORTH MAIN STREET  
PROVIDENCE, RHODE ISLAND 02903

R. I. No. 0046475  
Corporate ID 050438736

Annual Report for the year 1992

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	Director	
Bruce A. Demoranville	President	837 Pearse Rd., Swansea, MA 02777
None	Vice President	
John Holt	Secretary	4 Ivy Rd., Coventry, RI 02816
Bruce A. Demoranville	Treasurer	837 Pearse Rd., Swansea, MA 02777

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
8,000	common		no par

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
1,000	common		no par

PAID  
MAR 29 1993  
SECY OF STATE

*Check 4751  
90*

Dated FEB 8 1993

ABS Printing, Inc.

(Name of Corporation)

By: *Bruce A. Demoranville*  
Bruce A. Demoranville

Title: President

(Report must be signed by an officer)

Filing Fee \$50.00

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

4559 96  
**State of Rhode Island and Providence Plantations**

CORPORATIONS DIVISION  
100 NORTH MAIN STREET  
PROVIDENCE, RHODE ISLAND 02903

46475

Corporate ID 050438736 Annual Report for the year 1992

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	Director	
Bruce A. Demoranville	President	837 Pearse Road, Swansea, MA 02777
NONE	Vice President	
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No. of Shares	Class	Series	Par Value or statement that shares are without par value
1,000	Common		No Par

PAID  
AUG 05 1992  
SECY OF STATE

Dated July 13 19 92

ABS Printing, Inc.  
(Name of Corporation)

By *Bruce A. Demoranville*  
Bruce A. Demoranville

Title President

(Report must be signed by an officer)

Filing Fee \$50.00

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

4539 9/17  
**State of Rhode Island and Providence Plantations**

CORPORATIONS DIVISION  
100 NORTH MAIN STREET  
PROVIDENCE, RHODE ISLAND 02903

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	Director	
Bruce A. Demoranville	President	837 Pearse Road, Swansea, MA 02777
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John Holt	Secretary	4 Ivy Road, Coventry, RI 02816
Bruce A. Demoranville	Treasurer	837 Pearse Road, Swansea, MA 02777

SEVENTH: Number of Shares authorized:

No. of Shares	Class
8,000	Common

Series PAID

Par Value or statement that shares are without par value

No Par

EIGHTH: Number of Shares issued:

No. of Shares	Class
1,000	Common

Series

Par Value or statement that shares are without par value

No Par

AUG 05 1992

SECY OF STATE

Dated July 13 19 92

ABS Printing, Inc.

(Name of Corporation)

By *Bruce A. Demoranville*  
Bruce A. Demoranville

Title President

(Report must be signed by an officer)

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

46475

Annual Report for the year 1989 <sup>90 AT</sup>

FIRST: The name of the corporation is

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FIFTH: Business address in Rhode Island

250 Cowesett Avenue, West Warwick, RI 02893

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(Addresses must include street and number, if any)

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<u>Melanie Demoranville</u>	<u>Director</u>	<u>837 Pearse Road, Swansea, MA 02777</u>
	<u>Director</u>	
<u>Bruce A. Demoranville</u>	<u>President</u>	<u>837 Pearse Road, Swansea, MA 02777</u>
<u>NONE</u>	<u>Vice President</u>	
<u>Pauline Hamondtree</u>	<u>Secretary</u>	<u>398 Fairview Ave., Coventry, RI 02816</u>
<u>Bruce A. Demoranville</u>	<u>Treasurer</u>	<u>837 Pearse Road, Swansea, MA 02777</u>

(If additional space is needed, attach rider)

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
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EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
<u>1,000</u>	<u>Common</u>		<u>No par</u>

Dated: May 21, 1990

ABS Printing, Inc.  
(Name of Corporation)

By Bruce A. Demoranville  
Bruce A. Demoranville  
Title President

(Report must 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

Filing fee \$15.00

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

46475

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

Annual Report for the year 1989

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	Director	
Bruce A. Demoranville	President	837 Pearse Road, Swansea, MA 02777
NONE	Vice President	
Pauline Hammondtree	Secretary	398 Fairview Avenue, Coventry RI 02816
Bruce A. Demoranville	Treasurer	837 Pearse Road, Swansea, MA 02777

(If additional space is needed, attach rider)

SEVENTH: Number of Shares authorized:

No. of Shares	Class
8,000	Common

Series  
0010

Par Value or statement that shares are without par value

no par

JUL 3 1989  
SECY OF STATE

EIGHTH: Number of Shares issued:

No. of Shares	Class
1,000	Common

Series

Par Value or statement that shares are without par value

no par

Dated: February 27, 1989

ABS Printing, Inc.  
(Name of Corporation)

By Bruce A. Demoranville

Title President

(Report must 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