



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. 127684		2. Name of Corporation Northland Industrial Truck Co., Inc.			
3. Street Address Principal Business Office 6 JONSPIN RD		City WILMINGTON		State MA	Zip 01887
4. Business Phone No. 978-658-5900		5. State of Incorporation MASSACHUSETTS			6. SIC Code
7. Brief Description of the Character of Business Conducted in Rhode Island MATERIAL HANDLING DEALERSHIP					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name STEPHEN Q O'LEARY			Vice President Name ROBERT A. BOUDUC		
Street Address 6 JONSPIN RD			Street Address 6 JONSPIN RD		
City WILMINGTON	State MA	Zip 01887	City WILMINGTON	State MA	Zip 01887
Secretary Name PETER SORGI			Treasurer Name JOHN J McPARRY JR		
Street Address 50 STANFORD			Street Address 6 JONSPIN RD		
City BOSTON	State MA	Zip 02114	City WILMINGTON	State MA	Zip 01887
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name CHARLES SULLIVAN JR			Director Name		
Street Address 50 STANFORD STREET			Street Address		
City BOSTON	State MA	Zip 02114	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) ☐			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
15,000 COMM 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



127684

File Date	2-4-05
Check No.	67864
By	Robert A. Bouduc
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
ROBERT A. BOUDUC
Date
Vice President
Title of Officer



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

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

mailed
1/28/04

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. 127684		2. Name of Corporation Northland Industrial Truck Co., Inc.			
3. Street Address Principal Business Office 6 JONSPIN RD		City WILMINGTON	State MA	Zip 01887	
4. Business Phone No. 978-258-5900		5. State of Incorporation MASSACHUSETTS		6. SIC Code	
7. Brief Description of the Character of Business Conducted in Rhode Island MATERIAL HANDLING DEALERSHIP					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name STEPHEN Q O'LEARY			Vice President Name ROBERT A. BOLIVU		
Street Address 6 JONSPIN RD			Street Address 6 JONSPIN RD		
City WILMINGTON	State MA	Zip 01887	City WILMINGTON	State MA	Zip 01887
Secretary Name PETER SORGI			Treasurer Name JOHN MCCARTHY JR		
Street Address 50 STANFORD STREET			Street Address 6 JONSPIN RD		
City BOSTON	State MA	Zip 02114	City WILMINGTON	State MA	Zip 01887
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Street Address 50 STANFORD STREET			Street Address		
City BOSTON	State MA	Zip 02114	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
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11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐					
AUTHORIZED SHARES		ISSUED SHARES			
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
15,000 COMM 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 **2-2-04**
Check No **58429**
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.

Signature of Officer **Robert A. Bolivu** Date **1/28/04**
Print or Type Name of Officer **ROBERT A. BOLIVU**
Title of Officer **Vice President**



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.

127684

2. Name of Corporation

Northland Industrial Truck Co., Inc.

3. Street Address Principal Business Office

6 JONSPIN RD

City

WILMINGTON

State

MA

Zip

01857

4. Business Phone No

(978) 658-5800

5. State of Incorporation

MASSACHUSETTS

6. SIC Code

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

MATERIAL HANDLING DEALERSHIP

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

FILL IN SPACES BEFORE USING ATTACHMENTS

President Name

STEPHEN Q O'LEARY

Vice President Name

ROBERT A. BOUDUC

Street Address

6 JONSPIN RD

Street Address

6 JONSPIN RD

City

State

Zip

WILMINGTON MA 01857

City

State

Zip

WILMINGTON MA 01857

Secretary Name

PETER SORGI

Treasurer Name

JOHN McPARTHY JR

Street Address

50 STANFORD STREET

Street Address

6 JONSPIN RD

City

State

Zip

BOSTON MA 02114

City

State

Zip

WILMINGTON MA 01857

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

FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name

CHARLES SULLIVAN JR

Director Name

Street Address

50 STANFORD STREET

Street Address

City

State

Zip

BOSTON MA 02114

City

State

Zip

Director Name

Street Address

City

State

Zip

Director Name

Street Address

City

State

Zip

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

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

AUTHORIZED SHARES

ISSUED SHARES

Number of Shares

Class/Series

Par Value

15,000 COMM NO PAR VALUE

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



* 1 2 7 6 8 4 *

File Date: 2/5/03

Check No: 019728

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.

Robert A Bouduc 1/24/03

ROBERT A BOUDUC

Vice President