

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: **2021**
Corporation

→ Filing period: January 1 - March 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by April 1.

MAR 22 2021

BY: 22875 DS

1. Entity ID Number 1539		2. Exact name of the Corporation ATLAS BARREL AND PALLET, INC.	
3. Principal Office Address 50 Old Mill Street		City Harrisville	State RI
		Zip 02830	
4. NAICS Code 321999	6. Brief description of the character of business conducted in Rhode Island Manufacturing, recycling and repairing pallets.		
5. State of Incorporation Rhode Island			
7. List ALL officers (names and addresses)			
President Name Heather E. Ross		Vice-President Name Earl E. Handrigan	
Street Address 14 Elna Drive		Street Address 196 Rocky Hill Road	
City Smithfield	State RI	City Scituate	State RI
Zip 02917		Zip 02857	
Secretary Name Heather E. Ross		Treasurer Name Earl E. Handrigan	
Street Address 14 Elna Drive		Street Address 196 Rocky Hill Road	
City Smithfield	State RI	City Scituate	State RI
Zip 02917		Zip 02857	
8. List ALL directors (names and addresses)			
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
9. Shares Authorized		10. Shares Issued	
This information is currently of record in the Department of State.		Check the box to indicate an attachment ☐	
Changes require an additional filing.		NUMBER OF SHARES	CLASS/SERIES
		2	Voting
		198	Non Voting
			No Par Value
			No Par Value
11. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the 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.			
Name of Authorized Representative Heather E. Ross, President		Date 3/17/21	
Signature of Authorized Representative <i>Heather E. Ross</i>			

MAIL TO:

Division of Business Services

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Website: www.sos.ri.gov