

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State - Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

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PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2014 Filing Period: January 1 - March 1 · This report must be typed or printed legibly.

| Van Lie | w Securities Inc. | | | | | |
|--|--|--|--|--|--|--|
| | | | 2. Exact name of the Corporation Van Liew Securities Inc. | | | |
| Principal office address One Regency Plaza, Suite One | | City Providence | State RI | Zip \(\sigma\) 02963 | | |
| 4. Business Phone No. 401-272-2510 | | 5. State of Incorporati | ion | | | |
| ter of business | s conducted in Rhode Island | d | | [23 A | | |
| ES AND ADDR | ESSES) ("X" BOX FOR A | TTACHMENT) | | I 3 | | |
| resident Name Joseph J. Healy treet Address | | Vice-President Name None | | | | |
| iite One | | Street Address | | 0 | | |
| State RI | Zip 02903 | City | State | Zip | | |
| Secretary Name Steven M. McInnis | | Treasurer Name Kevin M. Oates | | | | |
| Street Address 38 Bellevue Avenue, Suite H City State Zip | | Street Address One Regency Plaza, Suite One | | | | |
| State RI | Zip 02840 | City Providence | State RI | Zip 02903 | | |
| JES AND ADD | RESSES) ("X" BOX FOR | ATTACHMENT) | | | | |
| Director Name Alfred B. Van Liew | | Director Name Steven M. McInnis | | | | |
| treet Address One Regency Plaza, Suite One | | Street Address 38 Bellevue Avenue, Suite H | | | | |
| State RI | Zip 02903 | City Newport | State RI | Zip 02840 | | |
| | | Director Name | | | | |
| ite One | | Street Address | | | | |
| State RI | Zip 02903 | City | State | Zip | | |
| | | 10. SHARES ISSUED | ("X" BOX FOR ATTACH | IMENT) | | |
| | | NUMBER OF SHARES | CLASS/SERIES | PAR VALUE | | |
| This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet. | | 1,000 | Stk | \$0.00 | | |
| n behalf of the of this report mus | corporation by an authorize | d representative. If the other | corporation is in the hands | s of a receiver or trustee, | | |
| | | Under penalty of pe this report, includir | erjury, I declare and affiring any accompanying s | chedules and statemen | | |
| | FILED | 4 m - 2 | | | | |
| | JUL 23 2014 | Signature of Authorized Representative Date | | | | |
| USE ONLY | 2290010 | Kevin M. Oates | | | | |
| ν, | ^ ^ | | or Authorized Representa | itive | | |
| | ite One State RI State RI MES AND ADD ite One State RI ite One State RI f record in the dditional filling leet. | ite One State RI Zip 02903 WES AND ADDRESSES) ("X" BOX FOR A DOZ | ES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) Vice-President Name None Street Address State Zip City RI 02903 Treasurer Name Kevin M. Oates Street Address One Regency P State Zip Providence MES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) Director Name Steven M. McIn Street Address 38 Bellevue Avi Street Address 38 Bellevue Avi Street Address 38 Bellevue Avi Street Address Treasurer Name Kevin M. Oates City Providence Street Address 38 Bellevue Avi Street Address 38 Bellevue Avi Street Address 10 City Newport Director Name Street Address Street Address 10 City Newport Director Name Street Address Trecord in the Office of the Secretary diditional filling. In behalf of the corporation by an authorized representative. If the othis report must be executed on behalf of the corporation by the report, including and that all statements FILED JUL 23 2014 Kevin M. Oates | ES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) VIOLE-President Name None Street Address Lite One State RI Director Name Street Address Street Address One Regency Plaza, Suite One State RI Director Name Steven M. McInnis Street Address One Street Address One Street Address One State RI MES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) Director Name Steven M. McInnis Street Address 38 Bellevue Avenue, Suite H State RI Director Name Street Address Street Address 10 City Newport RI Director Name Street Address Street Address 10 City Newport RI Director Name Street Address Street Address Street Address Ite One State RI Director Name Street Address Street Address Street Address Street Address Ite One State RI Director Name Street Address Street Address Street Address Ite One State RI Director Name Street Address Street Address Under penalty of perjury, I declare and affit this report must be executed on behalf of the corporation by the receiver or trustee. Under penalty of perjury, I declare and affit this report must be executed on behalf of the corporation by the receiver or trustee. Under penalty of perjury, I declare and affit this report, including any accompanying s and that all statements contained herein at the street and affit this report, including any accompanying s and that all statements contained herein at Street Address Signature of Authorized Representative Kevin M. Oates Print or Type Name of Authorized Representative | | |

Van Liew Securities Inc.

Corporate ID: 59275 2014 Annual Report Secretary of State

Continuation Sheet

OFFICERS:

Chairman: Alfred B. Van Liew One Regency Plaza, Suite One Providence, RI 02903

Van Liew Securities AR Addendum