Edward S. Inman, III. Secretary of State Corporations Dissilion 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

STOP
PLEASE READ
INSTRUCTIONS

FORM	M MUST BE TYPED OR PRINT	'ED IN BLACK)				
1 Co	rparate ID No.	2 Name of Corpor	ation			
	92217	Keyprint, I	nc.			
3 Str	eet Address Principal Business 25 Amflex Drive			City Cranston	State RI	Zip 02921
4. Bu	siness Phone No. 401-946-6100		5 State of Incorpor			6 SIC Code
7 Brio	of Description of the Character To provide printing so		RHODE ISL in Khode Island	AND		85
8. N Presid	AMES AND ADDRESS ent Name Robert C. Clement	SES OF THE OFF	TICERS (*X* BOX FOR A	TTACHMENT) & FILL IN SPACES  Vice President Name	BEFORE USING ATTA	ACHMENTS
Street	Address 100 Elena St., Apt. 913			Street Address		
City	Cranston	State RI	2ip 02920	City	State	Zip
	ary Name Robert C. Clement Address 100 Elena St., Apt. 913			Freasurer Name Richard S. Riley Street Address 7 Island Drive		
City	Cranston	State RI	<sup>Zip</sup> 02920	Coventry	State RI	ő <del>Ζ</del> 816
9. N Duecti	AMES AND ADDRESS or Name None	SES OF THE DIR	ECTORS ("X" BOX FOR	ATTACHMENT) FILL IN SPACE Director Name	ES BEFORE USING AT	TACHMENTS
street	Address			Street Address		
Oirj		State	Zip	City	State	Zip
)irecto	or Name			Director Name		
treet i	Address			Street Address		
Tity		State	Zip	City	State	Zip
	HARES AUTHORIZED	) ("X" BOX FOR ATT.	ACHMENT)	11. SHARES ISSUED (*	X" BOX FOR ATTACHMEN	·T)
lumbe	r of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1.0	00 \$1 00 PAR VALUE					

1,000 \$1.00 PAR VALUE

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

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3920
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# PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003

**Additional Information Sheet** 

## Keyprint, Inc.

Corporate ID No: 92217

### 8. NAME AND ADDRESSES OF THE OFFICERS (con't.)

Name Richard S. Riley	Address 7 Island Drive Coventry, RI 02816	Title Assistant Secretary
Richard S. Riley	7 Island Drive Coventry, RI 02816	Chairman

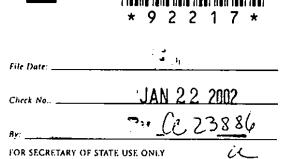
Edward S. Inman, III, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

# PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002 Filing Period: January 1-March 1 • Filing Fee: \$50.00

STOP PIEASE READ-INSTRUCTIONS

(FORM MUST BE TYPED IN BLACK) 1. Corporate ID No. 2. Name of Corporation 92217 Keyprint, Inc. 3. Street Address Principal Business Office State Zip 25 Amflex Drive Cranston RI 02921 4. Business Phone No. 5. State of Incorporation 6. SIC Code 401-946-6100 RHODE ISLAND 851 7. Brief Description of the Character of Business Conducted in Rhode Island To provide printing services FILL IN SPACES BEFORE USING ATTACHMENTS 8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) President Name Robert C. Clement Street Address Street Address 14 Ashland Drive State ZIp City State Zip 02857 North Scituate RI Treasurer Name Robert C. Clement Richard S. Riley Street Address Street Address 14 Ashland Drive 7 Island Drive State North Scituate RI 02857 Coventry RI 02816 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Director Name Director Name Street Address Street Address Zin City Stote Zip Director Name Director Name Street Address Street Address City State City Z, ipState Zip 10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) AUTHORIZED SHARES ISSUED SHARES Number of Shares Class/Serles Par Value Number of Shares Class/Series Par Volue 1,000 \$1.00 PAR VALUE 100 \$ 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.

| April | Compared | C

#### PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002

Additional Information Sheet

## Keyprint, Inc.

Corporate ID No: 92217

#### 8. NAME AND ADDRESSES OF THE OFFICERS (con't.)

Name
Address
Title

Richard S. Riley
7 Island Drive
Coventry, RI 02816
Phone: 461-1700

Richard S. Riley
7 Island Drive
Coventry, RI 02816
Phone: 461-1700

Chairman
Coventry, RI 02816
Phone: 461-1700



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 2001

STOP
PLEASE READINGS RECTIONS

Filing Period: January	1-March 1 •	Filing Fee: \$50.00			INSTE
FORM MUST BE TYPED IN BLA	CK)				
I. Corporate ID No. 92217	<ol> <li>Name of Corporations</li> <li>Keyprint,</li> </ol>				_
3. Street Address Principal Business	Office		City	State	Zip
25 Amflex Driv	re		Cranston	RI	02921
I. Business Phone No.		5. State of Incorporation	n		6. SIC Code
7. Brief Description of the Character To provide pri			Island		851
3. NAMES AND ADDRESS President Name Robert C. Cleme		CERS (*X* BOX FOR ATTA	ACHMENT) IN FILL IN SPACES BEI Vice President Name	FORE USING ATTAC	HMENTS
ireer Address 14 Ashland Driv	<i>r</i> e		Street Address		
North Scituate	State RI	<sup>Zip</sup> 02857	City	State	Zip
Robert C. CLeme	ent		Treasurer Name Richard S. Riley		
treet Address 14 Ashland Drive	2		Street Address 7 Island Drive		
Dity North Scituate	State RI	<sup>2ip</sup> 02857	<sup>City</sup> Coventry	State RI	<sup>Zip</sup> 02816
P. NAMES AND ADDRESS Director Name NONE	SES OF THE DIRE	CTORS ("X" BOX FOR AT	TTACHMENT) FILL IN SPACES E Director Name	BEFORE USING ATTA	ACHMENTS
treet Address			Street Address		
Illy	State	$z_{ij}$	City	State	Zip
Director Name			Olrector Name	·	
treet Address			Street Address		
Niy	State	Zip	Glty	State	Zip
O. SHARES AUTHORIZEI	D (*X* BOX FOR ATTA	ACHMENT)	11. SHARES ISSUED ("X" )	BOX FOR ATTACHMENT	י
Sumber of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Far Value
1,000	Common	\$1.00	10	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
-1 00 01	that all statements contained herein are true and correct.
File Date: + XO · O	Robert C Clement 7/16/01
$\leq C C C C$	Signature of Officer Date
Theck No.:	Robert C CLement
lu-	Print or Type Name of Officer
OR SECRETARY OF STATE USE ONLY	Mesident Title of Officer
	title of cifficer

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## PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001

Additional Information Sheet

Keyprint, Inc.

Corporate ID No:

92217

8. NAME AND ADDRESSES OF THE OFFICERS (con't.)

vume

Address

Title

Richard S. Riley

7 Island Drive

Assistant Secretary

Coventry, RI 02816

Phone: 461-1700

Richard S. Riley

7 Island Drive

Coventry, RI 02816

Phone: 461-1700

Chairman

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)

FOR SECRETARY OF STATE USE ONLY

2. Name of Corporation

92217	Keyprint,	Inc.				
3. Street Address Principal Busine	ess Office		Спу	State	Zip	
25 Amflex	Drive	5. State of Incorporation RHODE ISLAND	Cranston	RI -	02921	
401-946-61 7. Brief Description of the Charac					-	
To provide B. NAMES AND ADDRI President Name	printing se esses of the Offi	ervices and to CERS (*X* BOX FOR ATTACE	operate a priment) FILLIN SPACE  Vice President Name	nting busine SBEFORE USING AT	SS. TACHMENTS	
Robert F.	Tierney		JoAnn V. Rile	еу		
25 Amflex	Drive		25 Amflex Dr:	ive		
City	State	Zip	City	State	Zip	
Cranston Secretary Name	ŔI	02921	Cranston Treasurer Name	RI	02921	
JoAnn V. R	iley		Robert F. Ti	ernev		
Street Address 25 Amflex	<del>-</del>	•	Street Address 25 Amflex Dr.	· ·		
Cranston	State RI	02921	city Cranston	State RI	02921	
9. NAMES AND ADDRI Director Name None	ESSES OF THE DIRI	ECTORS ("X" BOX FOR ATTA	CHMENT) FILL IN SPAC Director Name	CES BEFORE USING A	ATTACHMENTS	
Street Address			Street Address		•	
Gity	State	Zip	City	State	Zip	
Director Name			Director Name			
Street Address			Street Address			
City	State	Zip	Clly	State	Zip	
10. SHARES AUTHORIZ AUTHORIZED SHARES	ZED ("X" BOX FOR ATT.	ACHMENT)	11. SHARES ISSUED	("X" BOX FOR ATTACHN	fENT)	
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value	
1,000 SHS \$1.00	) PAR VALUE			·	•	
			100	common	\$1.00	
This report must be sign		- ner the President, Vice I	Precident Secretary As	rictant Socretary Te	ensurer Pecaiver or T	
ms report must be sig	a isua usis usa usa usa isai u	nei the tresident, vice i	rresident, secretary, As	sistant secretary, it	easulet, Receiver of the	usice
1					P. C.	
					8	ı
*	9 2 2 1 7 1	k	•	- · · · · · · · · · · · · · · · · · · ·	ffirm that I have examine	
$\stackrel{\sim}{\sim}$	1/18/00			ling any accompanying scontained herein are	schedules and statement true and correct.	i, and
File Date:	110100		////	ケア	a / /	



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)

I. Corporate ID No.

2. Name of Corporation

92217

Keyprint, Inc.

3.	Street	Address	Principal	Business	on
•		******		,,,,,,,,,,,	$\sim 11$

Cranston

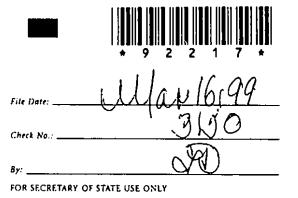
4. Busines 2,50 on Amflex Drive

S. Sinte of Incorporation **RHODE ISLAND**  RI

851

mber of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
. SHARES AUTHOR	IZED (*x* box for at		11. SHARES ISSUED		
Y	State	Zip	City	State	Żip -
ret Address			Street Address		
ector haine			Director Nume		
Y	\$1.11 <del>1</del>	ël <sub>j</sub>	c.y	) ate	210
None er Address			Street Address		
ector Name			Director Name		
Cranston NAMES AND ADD	RI RESSES OF THE DIR	02921 SECTORS ("X" BOX FO	Cranston RATTACHMENT) FILLIN SPAC	RI SES BEFORE USING	02921 ATTACHMENTS
,	State	Zip	City	State	Zip
t Address 25 Amflex	Drive		Street Address 25 Amflex Dri	.ve	
JoAnn V. I	Riley		Robert F. Tie	rney	
Cranston etary Name	RI	02921	Cranston Treasurer Name	RI	02921
25 Amflex	Drive State	Zip	$25_{CHy}$ Amflex Dri	.VE State	Zip
Robert F.	Tierney		JoAnn V. Rile	e <b>y</b>	-
sident Name		TCERS ("X" BOX FOR A	Vice President Name	S BEFORE USING AT	TACHMENTS
Tagravide	arinting s	eryjces and	to operate a prin	ting busine	SS.

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.



92217

3. Street Address Principal Business Office

James R. Langevin, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-277.3040

Keyprint, Inc.

Zip

State

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. 2. Name of Corporation

City

(3
TTOP!
: P1 (335) P1 316
PLEASE READS

4. Busti	,25,,Amflex	c Drive	S. State of Incorporation	Cranston	RI	939 <b>2</b> 1
		00 Seler of Business Conducted In	Rhode 1	Island		0851
	To provide AMES AND ADDR	printing se Esses of the offi	ervices and to CERS (X BOX FOR ATTACK	operate a prin HMENT) Vice President Name	ting busine	SS.
Street A	Robert F.	Tierney		Joann V. Rile	e <b>y</b>	-
City	25 Amflex	Drive State	Zip	25 Amflex Dri	.ve State	Zip
Secreta	Cranston	RI	02921	Cranston Treasurer Name	RI	02921
Street /	JoAnn V. F	Riley		Robert F. Tie	erney	
City	25 Amflex	Drive State	Zip	25 Amflex Dri	.ve State	Zip
		RI RESSES OF THE DIRE	02921 ECTORS ("X" BOX FOR ATT	Cranston ACHMENT) Director Name	RI	02921
Directo	n Name None			Dietor Ivania		
Street				Street Address		
City		State	Zip	City	State	Zip
Directo	n Name			Director Name		
Street	Address			Street Address		
City		State	Zip	City	State	Zip
	HARES AUTHORI	IZED (*X* BOX FOR ATT	ACHMENT)	11. SHARES ISSUED	(*X* BOX FOR ATTACHN	AENT)
Numbe	er of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
	1,000	SHS \$1.00		100	common	\$1.00
			•			

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

•	
	5-6-98
File Date:	<u> </u>
Check No.:	2201
Ву:	AMF
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.



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

10. SHARES AUTHO AUTHORIZED SHARES

Number of Shares \$1.00 PAR VALUE

(FORM MUST BE TYPED IN BLA					COMPLETING THIS FORM:
1. Co <b>9224D</b> No.	<sup>2</sup> Keyprint <sub>i</sub> olni	Bri			
3. Street Address Principal Business	Office		Gity	State	Zip
1280 Jefferson E 4. Business Phone No.	Boulevard	s RHODEHOUAI	Warwick N <b>D</b>	RI	02886 6. SIC Code
(401) 732-9745 7. Brief Description of the Character	of Business Conducted in	Rhode Island			0851
To provide print 8. NAMES AND ADDRES President Name	_	-	a printing busine CHMENT)  Vice President Name	ss	
Robert F. Tierne Street Address	<b>y</b>		JoAnn V. Rile	у .	
1280 Jefferson H		7/-	1280 Jefferso		715
City Warwick Secretary Name	State RI	zip 02886	City Warwick Treasurer Name	State RI	21p 02886
JoAnn V. Riley Street Address			Robert F. Tie Street Address	rney	·
1280 Jefferson Boulevard			1280 Jefferson Boulevard State Zia		
City Warwick	State RI	zı <sub>p</sub> 02886	cny Warwick	RI	<sup>Zip</sup> 02886
9. NAMES AND ADDRES Director Name	***				
None Street Address			Street Address		
Gity	State	Zir	City	State	Zip
Director Name			Director Nume		•
Street Address			Street Address		
Gity	State	Zip	Сну	State	Zip
10. SHARES AUTHORIZE	D AND ISSUED (*)	X" BOX FOR ATTACHMENT.	)		

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

Par Volue

ISSUED SHARES

100

Number of Shares



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.

Class/Series

Common

Par Value

\$1 Par Value

Title of Officer

FOR SECRETARY OF STATE USE ONLY