2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F04000002643

1. Entity Name

FALVEY STEEL CASTINGS, INC.



FILED Jan 23, 2007 08:00 AM Secretary of State

Principal Place of Business

3 PHILLIPS ROAD HOLBROOK, MA 02343 Mailing Address

P.O. BOX 425

HOLBROOK, MA 02343



DO NOT WRITE IN THIS SPACE	DO	NOT	WRITE	IN THIS	SPACE
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01172007 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For Not Applied For Not Applicable

5. Certificate of Status Desired Sa.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LAMB, STUART 110 S. SEWALLS POINT ROAD STUART, FL 34966

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the prions of registered agent.	urpose of changing its registere	d office or r	egistered agent, or bo	th, in the State of Flori	da. I am familiar w	vith, and accept		
SIGNATURE									
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Financ Trust Fund Contribution.	ping	\$5.00 May Be Added to Fees					
10. TITLE	OFFICERS AND DIREC	TORS							
NAME STREET ADDRESS CITY-ST-ZIP	FALVEY, FRANK B SR. 21 TRYSTING PLACE N. SCITUATE, MA 02060								
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FALVEY, ANN B 21 TRYSTING PLACE N SCITUATE, MA 02060				U000003 01/25/07-(599719 30039-001	150.00		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LAMB, STUART 110 S. SEWALLS POINT ROAD STUART, FL 34996			DO	NOT WI				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPA	ACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP									
-TITLE NAME: STREET ADDRESS CITY-ST-ZIP	85						-		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information									

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE

GNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECT

1-17-07

781-767-6210

Daytime Phone #