

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000000664

Entity Name: RHODE ISLAND ENGINE CO., INC.

FILED
Jul 11, 2008
Secretary of State

Current Principal Place of Business:

79 STATE STREET
POST OFFICE BOX 543
NARRAGANSETT, RI 028820543

New Principal Place of Business:

79 STATE STREET
NARRAGANSETT, RI 028820543

Current Mailing Address:

79 STATE STREET
POST OFFICE BOX 543
NARRAGANSETT, RI 028820543

New Mailing Address:

POST OFFICE BOX 543
NARRAGANSETT, RI 028820543

FEI Number: 05-0340309

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GALLUP, BARRY P
13585 SE 42ND ST
SE 128TH AVENUE
OKEECHOBEE, FL 34974 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PC () Delete
Name: GALLUP, BARRY P JR
Address: 27 MINISTERIAL ROAD
City-St-Zip: WAKEFIELD, RI 02879

Title: WVC () Delete
Name: GALLUP, DAVID B
Address: 73 NARROW LANE
City-St-Zip: CHARLESTOWN, RI 02813

Title: SD () Delete
Name: GALLUP, BARRY P
Address: 13585 SE 42ND ST
City-St-Zip: OKEECHOBEE, FL 34974

Title: TD () Delete
Name: GALLUP, BARBARA
Address: 13585 SE 42ND ST
City-St-Zip: OKEECHOBEE, FL 34974

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic signature shall have the same legal effect as if made under oath; 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BARRY P. GALLUP, JR.

PRES

07/11/2008

Electronic Signature of Signing Officer or Director

Date