

1.) CORPORATION NAME:

**Symmons Industries, Inc.**

DUE DATE: **1/31/2011**

SCC ID NO: **F1456609**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

**AUTH IN VI**

**NATIONAL REGISTERED AGENTS, INC.  
4001 NORTH NINTH STREET, SUITE 227  
ARLINGTON, VA 22203**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	600,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**ARLINGTON COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**MA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 31 BROOKS DR

CITY/ST/ZIP: BRAINTREE, MA 02184-

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: TIMOTHY E O'KEEFFE  
TITLE: PRESIDENT  
ADDRESS: 24 WATER ST  
CITY/ST/ZIP/CO: HINGHAM, MA 02043-

OFFICER

DIRECTOR

NAME: WILLIAM B O'KEEFE  
TITLE: CEO/CHAIRMAN  
ADDRESS: 74 CHESTNUT STREET  
CITY/ST/ZIP/CO: BOSTON, MA 02108-

OFFICER

DIRECTOR

NAME: JOHN W GRAVES  
TITLE: CFO  
ADDRESS: 16 POND ST  
CITY/ST/ZIP/CO: NORTH EASTON, MA 02356-

OFFICER

DIRECTOR

NAME: PAULA J O'KEEFE  
TITLE: DIRECTOR  
ADDRESS: 74 CHESTNUT STREET  
CITY/ST/ZIP/CO: BOSTON, MA 02108-

OFFICER

DIRECTOR

NAME: R IAN O'KEEFFE  
TITLE: DIRECTOR  
ADDRESS: 42 CHESTNUT ST  
CITY/ST/ZIP/CO: BOSTON, MA 02108-

OFFICER

DIRECTOR

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

<u>/s/ JOHN W GRAVES</u>	<u>JOHN W GRAVES, CFO</u>	<u>1/19/2011</u>
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.