

SCC eFile	2015 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	215507594
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1.) CORPORATION NAME: Matrix Power Services, Inc.	DUE DATE: 2/28/2015				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: CT CORPORATION SYSTEM 4701 COX ROAD, SUITE 285 GLEN ALLEN, VA	SCC ID NO: F1500760				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: HENRICO COUNTY	5.) STOCK INFORMATION				
4.) STATE OR COUNTRY OF INCORPORATION: RI	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">CLASS</td> <td style="width:50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>900</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	900
CLASS	AUTHORIZED				
COMMON	900				

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: PO BOX 32
59 DAVIS DRIVE

CITY/ST/ZIP: POSCOAG, RI 02859

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: DAVID JARRY	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
TITLE: PRESIDENT			
ADDRESS: 155 POMONA STREET			
CITY/ST/ZIP/CO: N SMITHFIELD, RI 02896			

NAME: RICHARD D AHERN JR	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
TITLE: VICE PRESIDENT			
ADDRESS: 430 SNAKE MEADOW HILL ROAD			
CITY/ST/ZIP/CO: STERLING, CT 06377			

NAME: CHRISTOPHER SURETTE	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR	
TITLE: VICE PRESIDENT			
ADDRESS: 1115 71ST ST NW			
CITY/ST/ZIP/CO: BRADENTON, FL 34209			

NAME: ANN-MARIE FONTAINE	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR	
TITLE: TREASURER			
ADDRESS: 235 NANCY LANE			
CITY/ST/ZIP/CO: HARRISVILLE, RI 02830			

NAME: NORMAN SOULLIER III	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
TITLE: DIRECTOR			
ADDRESS: 490 SOUTH MAIN STREET			
CITY/ST/ZIP/CO: PASCOAG, RI 02859			

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.

/s/ ANN-MARIE FONTAINE	ANN-MARIE FONTAINE, TREASURER	2/26/2015
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.