

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street Providence, RI 02904-2615 401.222.3040

2011

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2011

Filing Period: January 1 - March 1 • Filing Fee: \$50.00° • THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.

TWO ELM STREET (P.C Business Phone No. (401) 596-0225	Office Nov 414)			2. Name of Corporation CLASSIC ACRES, INC.				
(401) 596-0225	2. BOX 111)	Street Address Principal Business Office TWO ELM STREET (P.O. Box 414)			<i>Ζφ</i> 02891			
D : CD : Stir - Ch quanton	Business Phone No. (401) 596-0225 State of Incorporat							
REAL ESTATE DEVELOPN				en de la companya de la Austra Martines Dese	entant a <u>a la la vez la red vill</u>ation de la co			
. NAMES AND ADDRESSES	OF THE OFFICERS:	("X" BOX FOR ATTAC		PACES BEFORE USING A	TTACHMENTS			
resident Name			Vice President Name					
Kathleen A. Thompson			S. Addan					
Street Address 9 Wicasta Farm Road			Street Address					
ty Hope Valley	State Rhode Island	^{Zip} 02832	City	State	Ζίρ			
Secretary Name Kathleen A. Thompson			Treasurer Name Kathleen A. Thompson					
Street Address 9 Wicasta Farm Road			Street Address 9 Wicasta Farm Road					
Hope Valley	State Rhode Island	^{Zip} 02832	City Hope Valley	Rhode Island	^{Zip} 02832			
. NAMES AND ADDRESSES	OF THE DIRECTOR	S: ("X" BOX FOR ATT	ACHMENT) 🗌 FILL IN	SPACES BEFORE USING	ATTAGHMENTS			
Director Name	AND THE PERSON OF THE PERSON O		Director Name		4			
Kathleen A. Thompson			Jean I. Stevenson					
treet Address			Street Address 6 Red Fox Trail					
Wicasta Farm Road	<u> </u>	-T	}	State	Zip			
Sity	State Discription of	<i>Ζψ</i>	City Hope Valley	Rhode Island	02891			
Hope Valley	J Rhode Island	02832	Director Name	Triloge island				
Director Name			Director Traine					
Street Address			Street Address					
MEET VITTIESS								
City	State	Zip	City	State	Zip			
). SHARES AUTHORIZED			the management of the state of the management of the	("X" BOX FOR ATTACH ECTION MUST BE COMPLETED	IMENT)			
	C	Sing of the Sagratary of	Number of Shares	Class/Series	Par Value			
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.			1000	Common	None			
msauction sheet.			19 \$43. SST		v 243			
This report must be executed this report must be executed	d on behalf of the cor	poration by an authorize poration by the receiver	ed representative. If the or trustee.	corporation is in the hands	s of a receiver or trus			

FILED
FEB 16 2011
File Date
Check No. By 1100
By: 1381
FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affi including any accompanying schedules and contained herein are true and correct.	d statements, and that all statements
Kataleen a Thi	1121/11
Signature	/ Date
Kathleen A. Thompson	
Print or Type Name	
President	
Title	Form 630 Rev. 08/08