RI SOS Filing Number: 200704253030 Date: 12/05/2007 4:00 PM

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Corporations Division
148 W. River St.
Providence, RI 02904-2615
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2007

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

**** In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of $25.00.***

1. Corporate ID No.	2. Name of Corporation			
000131133	FORESIGHT ENTERPRISES CORP.			
3. Street Address Principal Business Office		City	State	Zip
110 FREEMAN ST		BELLINGHAM	MA	02019
4. Business Phone No.	5. State of Incorporation			
(508) 883-6743	MA			

6. Brief Description of the Character of Business Conducted in Rhode Island

HOME BUILDER

7. NAMES AND ADDRESSES OF THE OFFICERS: ***("X" BOX FOR ATTACHMENT)*** ☐ FILL IN SPACES BEFORE USING ATTACHMENTS

President Name			Vice President Name		
ROGER M GAGNON			JEFFREY M GAGNON		
Street Address			Street Address		
8 EDWARD CIRCLE			11 ACORN ST		
City	State	Zip	City	State	Zip
BELLINGHAM	MA	02019	BELLINGHAM	MA	02019
Secretary Name			**Treasurer Name**		
[redacted] JEFFREY M GAGNON			[redacted] ROGER M GAGNON		
Street Address			Street Address		
[redacted] 11 ACORN ST			[redacted] 8 EDWARD CIRCLE		
City	State	Zip	City	State	Zip
BELLINGHAM	MA	02019	BELLINGHAM	MA	02019

8. NAMES AND ADDRESSES OF THE DIRECTORS: ***("X" BOX FOR ATTACHMENT)*** ☐ FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip

9. SHARES AUTHORIZED ***("X" BOX FOR ATTACHMENT)*** ☐

10. SHARES ISSUED ***("X" BOX FOR ATTACHMENT)*** ☐

AUTHORIZED SHARES			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
15,000	CMP	0.00	400	CMP	0.00

This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

[redacted]

FILED 1:45
File Date DEC 05 2007
Check No. By EVC
By: 14908-4-18113 043821
FOR SECRETARY OF STATE USE ONLY

[redacted]

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Roger M Gagnon — *Signature* — 12/5/07 *Date*

ROGER M GAGNON — *Print or Type Name*

President-Treasurer — *Title*

[redacted]

DEC 5 2007 1:45

Form 630 Rev. 08/06