



134608

Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3046

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2008

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. Corporation ID No. 134608		2. Name of Corporation Ocean State Title Services, Inc.			
3. Street Address Principal Business Office 9 Nelson Street			City Providence	State RI	Zip 02908
4. Business Phone No. (401) 521-9694		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island TO CONDUCT REAL ESTATE TITLE EXAMINATIONS, RESEARCH AND REPORTS					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Alberta M. Nota			Vice President Name Alberta M. Nota		
Street Address 9 Nelson Street			Street Address 9 Nelson Street		
City Providence	State RI	Zip 02908	City Providence	State RI	Zip 02908
Secretary Name Alberta M. Nota			Treasurer Name Alberta M. Nota		
Street Address 9 Nelson Street			Street Address 9 Nelson Street		
City Providence	State RI	Zip 02908	City Providence	State RI	Zip 02908
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Alberta M. Nota			Director Name Same		
Street Address 9 Nelson Street			Street Address		
City Providence	State RI	Zip 02908	City	State	Zip
Director Name Same			Director Name Same		
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
2000			100	Common	None

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.

FILED

DEC 31 2007

File Date

Check No.

By:

FOR SECRETARY OF STATE USE ONLY

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.

Signature

Date

Alberta M. Nota

Print or Type Name

President

Title

Form 630 Rev. 12/06