



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

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

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. Corporate ID No. 9934		2. Name of Corporation Seaside Realty Company			
3. Street Address Principal Business Office 145 Boon Street			City Narragansett	State RI	Zip 02882
4. Business Phone No. None		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island Building Lessor					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Winifred Whaley			Vice President Name Winifred Whaley		
Street Address 4854 N.W. 20TH Street			Street Address 4854 N.W. 20TH Street		
City Ocala	State FL	Zip 34482	City Ocala	State FL	Zip 34482
Secretary Name Winifred Whaley			Treasurer Name Winifred Whaley		
Street Address 4854 N.W. 20TH Street			Street Address 4854 N.W. 20TH Street		
City Ocala	State FL	Zip 34482	City Ocala	State FL	Zip 34482
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name None			Director Name None		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name None			Director Name None		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
500 Comm No Par Value			200	Common	No Par

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	
File Date	JAN 10 2008
Check No.	
By	1122
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.

Chester Whaley (Guardian)
Signature
WINIFRED WHALEY
Print or Type Name
President-
Title