

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

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2008

401.222.3040

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 possibly fee of \$25.00

1. Corporate ID No. 125396		2. Name of Corporation New Walk Properties, Inc.				
3. Street Address Principal Business Office 806 High Street			City Cumberland	State RI	^{Zip} 02864	
4. Business Phone No. 401-465-1809 5. State of Incorpor Rhode Island					02004	
6. Brief Description of the Cb Own and Manage Re	eal Estate					
7. NAMES AND ADDR President Name	ESSES OF THE OFFI	CERS: ("X" BOX FOR	CATTACHMENT) ☐ FILL IN	SPACES BEFORE USING	ATTACHMENTS	
Michael J. Newman			· · · · · · · · · · · · · · · · · · ·	Vice President Name Michael J. Newman		
Street Address 806 High Street			Street Address 806 High Street			
City	State	Zip -	City	State	Zip	
Cumberland	RI	02864	Cumberland	RI	02864	
Secretary Name Michael J. Newman				Treasurer Name Michael J. Newman		
Street Address 806 High Street			Street Address 806 High Street	•		
Cumberland	State RI	^{Zф} 02864	City Cumberland	State RI	^{Zip} 02864	
8. NAMES AND ADDRI	ESSES OF THE DIREC	Tors: ("x" box fo	OR ATTACHMENT) 📗 FILL II	N SPACES BEFORE USIN	G ATTACHMENTS	
Director Name Michael J. Newman			Director Name			
Street Address 806 High Street			Street Address			
City	State	Zip	City	State	Zip	
Cumberland	RI	02864		<u> </u>		
Director Name		v	Director Name	***************************************	***************************************	
Street Address			Street Address			
City	State	Zip	City	State	Zip	
9. SHARES AUTHORIZ	ED ("X" BOX FOR A	TTACHMENT)	i 10. Shares Issued	("X" BOX FOR ATTAC	 MBNO-	
AUTHORIZED SHARES				CTION <u>MUST</u> BE COMPLETED		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value	
500 COMM NO PAR VALUE			500	Common	No Par	
This report must be executive the execution	cuted on behalf of the	corporation by an aut	horized representative. If the c	orporation is in the hands	s of a receiver or trustee,	

File Date JAN 24 2008 Check No.
File Date JAN 24 2008 Check No.
File Date JAN 24 2008
File Date JAN 24 2008 Check No.
File Date JAN 24 2008 Check No.
File Date JAN 24 2008 Check No.
File Date JAN 2 4 2008 Check No.
File Date JAN 24 2008 Check No.
File Date JAN 24 2008 Check No.
File Date JAN 24 2008 Check No.
JAN 24 2008
JAN 24 2008
Check No. JAN 24 2008
Check No. JAN 24 2008
JAN 24 2008
JAN 24 2008 Check No.
Check No. 24 2008
Check No. 199
Check No.
Check No.
Check No.
Check No. 1102
Check No. 1182
1122 :
Transfer of the Control of the Contr
A A A A A A A A A A A A A A A A A A A
FOR SECRETARY OF STATE USE ONLY
A TOTAL CONTROL OF THE CONTROL OF TH
2.00

Under penalty of perjury, I declare and including any accompanying schedules contained herein are true and correct.	affirm that I have examined this report, and statements, and that all statements
MIMeur	
Signature	Date
Michael J. Newman	
Print or Type Name	
President	
Title	