

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

401.222.

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

1. Corporate ID No. 100537	2. Name of Co AAA Sou	pporation thern New England Me	ortgage Corporation		
3. Street Address Principal Business Office 110 ROYAL LITTLE DRIVE			City PROVIDENCE	State RI	Zip
4. Business Phone No. 5. State of Incorporation 4018682000 Rhode Island			ition		02904
5. Brief Description of the Chi MORTGAGE LENI	DING, SEKATÜI	NG, BROKERING AN	ND RELATED FINANCIA	L SERVICES	
. NAMES AND ADDR	ESSES OF THE OFF	ICERS: ("X" BOX FOR	ATTACHMENT) FILL IN S	PACES BELODE LICIAL	
			ATTACHMENT) [FILL IN SPACES BEFORE USING ATTACHMENTS Vice President Name		
Mark A. Shaw			Deborah A. Imondi		
Street Address 110 Royal Little Drive			Street Address 110 Royal Little Drive		
Providence	State RI	Zip 02904	Gily Providence	State RI	Zip 02904
Secretury Name R. Stephen Manty			Treasurer Name R. Stephen Manty		
Street Address 110 Royal Little Drive			Street Address 110 Royal Little Drive		
Providence	State RI	^{Zip} 02904	City	State	<i>z_{ip}</i> 02904
NAMES AND ADDRE	SSES OF THE DIRE	CTORS: ("X" BOX FOR	ATTACHMENT) FILL IN	SPACES REPORT TIOTA	02904
Mark A. Shaw Greet Address			ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Director Name Joseph F. Whinery Jr.		
ity	State	T	110 Royal Little Drive		
Providence	RI	Zip	City	State	Zip
rector Name		02904	Providence	RI	02904
David I. Finnegan			Director Name		•
treel Address			Street Address		
10 Royal Little Drive	<u> </u>		on our ridar ess		
Providence	State RI	<i>π</i> φ 02904	City	State	Zip
SHARES AUTHORIZE	D ("X" BOX FOR	ATTACHMENT) [: 10. SHARES ISSUED ("Y" BOY EON TON	
THORIZED SHARES			ISSUED SHARES — THIS SECT	ION MUST BE COMPLETED	IMENT)
mber of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
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FOR SECRETARY OF STATE USE ONLY	

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
Signature	Date
R. Stephen Manty	
Print or Type Name	
_Treasurer	
Title	