



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 02904-261  
401.222.304

**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. 84034		2. Name of Corporation Clayton Realty Associates, Inc.	
3. Street Address Principal Business Office 7 White Birch Lane		City Barrington	State RI
		Zip 02806	
4. Business Phone No.		5. State of Incorporation Rhode Island	

5. Brief Description of the Character of Business Conducted in Rhode Island  
Developer and Operator of Commercial Real Estate

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

President Name Alan L. Stanzler			Vice President Name		
Street Address 7 White Birch Lane			Street Address		
City Barrington	State RI	Zip 02806	City	State	Zip
Secretary Name Alan L. Stanzler			Treasurer Name Alan L. Stanzler		
Street Address 7 White Birch Lane			Street Address 7 White Birch Lane		
City Barrington	State RI	Zip 02806	City Barrington	State RI	Zip 02806

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

Director Name Alan L. Stanzler			Director Name		
Street Address 7 White Birch Lane			Street Address		
City Barrington	State RI	Zip 02806	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip

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

Number of Shares	Class/Series	Par Value
1,000	No Par Value	

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

ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
Number of Shares	Class/Series	Par Value
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.

File Date **FILED**  
 Check No. **FEB 27 2008**  
 By: **1087**  
 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 hereon are true and correct.

Signature: *[Signature]*  
 Date: **2/25/08**  
 Alan L. Stanzler  
 Print or Type Name  
 President, Secretary and Treasurer  
 Title