

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. 260614	2. Name of Corpore Fry Appraisa	2. Name of Corporation Fry Appraisal Company			
3. Street Address Principal Business Office 180 Twin Brook Lane			City Coventry	State R1	<i>гџ</i> 02816
4. Business Phone No. 401-578-8571		5. State of Incorpora Rhode Island			
Real estate appraisa			K JOSEPH ORGEN SIGNAGUNIAN OFFE A FARRANCINA F	DESCRIPTION TO DESCRIPTION OF	A THIN CALL THE DIMES
the contract of the contract o	RESSES OF THE OFFICE	ERS: ("X" BUX FUK	ATTACHMENT) FILL IN S Vice President Name	SPACES DEPORE USING	ATTACINALITY
President Name			Luke Fry		
Luke Fry Stree Address 180 Twin Brook Lane			Street Address 180 Twin Brook Lane		
Cit;	State	Zip	City	State	Zip
Coventry	RI	02816	Coventry	RI	02816
Secretary Name Luke Fry			Treasurer Name Luke Fry		
Sirea Aidress 180 Twin Brook Lane			Street Address 180 Twin Brook Lane		
Сиу Coventry	State RI	^{Zip} 02816	City Coventry	State RI	2 <i>ф</i> 02816
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Director Name Luke Fry					NV.
Sirea Address			Street Address		
180 Twin Brook L	ane				Section 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
City	State RI	Zip 02816	City	State	24
Coventry JRI 02816 Director Name			Director Name		
Street Address			Street Address S D C C		
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9. SHARES AUTHOF	RIZED (*X**BOX:FOR > Class/Series	Par Value	Number of Shares	Class/Series	Par Value
9. SHARES AUTHOR AUTHORIZED SHARES	Class/Series			Class/Series common	

this report must be executed on behalf of the corporation by the receiver or trustee.

File Date			
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	577, 5572, 1757
Under penalty of perjury, I declare ar including any accompanying schedul	nd affirm that I have examined this report, les and statements, and that all statements
contained herein are true and correct	
Signature	Date
Luke Fry	
Print or Type Name	
President	
Title	Form 630 Rev. 12/06